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Fill in this information to identify your case:	
United States Bankruptcy Court for the:	
Northern District of: Illinois (State)	
Case number (if known)	Chapter you are filing under:
	Chapter 7 Chapter 11
	Chapter 12 Chapter 13

### Official Form 101

### **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself				
	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
Your full name	Kieala			
Write the name that is on	First name	First name		
your government-issued picture identification (for	Middle name	Middle name		
example, your driver's	Sanders			
license or passport	Last name	Last name		
Bring your picture identification to your	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)		
meeting with the trustee.		• • • • • • •		
2. All other names you				
have used in the last	First name	First name		
8 years				
Include your married or	Middle name	Middle name		
maiden names.	Last name	Last name		
	Last Harie	Last Harlo		
	First name	First name		
	Middle name	Middle name		
	Last name	Last name		
3. Only the last 4 digits of your Social	XXX - XX- 9165	xxx - xx-		
Security number or federal Individual	OR	OR		
Taxpayer	9 xx - xx-	9 xx - xx-		
Identification number (ITIN)	<del></del>			

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De	ebtor 1 Kieala	Sanders	Case number (if known)
	First Name	Middle Name Last Name	
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer	I have not used any business names or EINs.	I have not used any business names or EINs.
	Identification Numbers (EIN) you have used in the last	Business name	Business name
	8 years	Business name	Business name
	Include trade names and doing business as names	EIN	EIN
		EIN	EIN
5.	Where you live		If Debtor 2 lives at a different address:
		5138 Washington St	-
		Number Street	Number Street
		Hills in CO4.00	
		Hillside Illinois 60162 City State Zip Code	City State Zip Code
		·	, '
		Cook County	County
		If your mailing address is different from the one	If Debtor 2's mailing address is different from yours,
		above, fill it in here. Note that the court will send any	fill it in here. Note that the court will send any notices to
		notices to you at this mailing address.	this mailing address.
		Number Street	Number Street
		City State Zip Code	Oik. Olaka 7ia Olaka
_		City State Zip Code	City State Zip Code
6.	Why you are choosing this district	Check one:	Check one:
	to file for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		I have another reason. Explain. (See 28 U.S.C. §§ 1408.)	I have another reason. Explain. (See 28 U.S.C. §§ 1408.)
_			

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De	ebtor 1 Kieala			Case number (if kno	wn)
	First Name	Middle Name	Last Name		
Pa	rt 2: Tell the Court Abo	ut Your Bankruptcy Case			
7.	The chapter of the Bankruptcy Code you are choosing to file under	Check one. (For a brief descrip Bankruptcy (Form B2010)). Also Chapter 7 Chapter 11 Chapter 12 Chapter 13			. § 342(b) for Individuals Filing for priate box.
8.	How you will pay the fee	more details about how you cashier's check, or money may pay with a credit card.  I need to pay the fee in in Individuals to Pay Your Fall of the Judge may, but is not required the official poverty line the	rou may pay. Typically, if you order If your attorney is dor check with a pre-printe mstallments. If you choose filling Fee in Installments (Cowaived (You may request uired to, waive your fee, an last applies to your family sign must fill out the Applic	ou are paying the submitting your ed address. ethis option, signormal this option only ad may do so only are under and you are under submitted the submitted that the	the clerk's office in your local court for a fee yourself, you may pay with cash, a payment on your behalf, your attorney on and attach the <i>Application for</i> A).  If you are filing for Chapter 7. By law, a y if your income is less than 150% of nable to pay the fee in installments). If the Chapter 7 Filing Fee Waived (Official)
9.	Have you filed for bankruptcy within the last 8 years?	Ves. District District District	When When When	MM / DD / YYYY  MM / DD / YYYY  MM / DD / YYYY	Case number  Case number  Case number
10.	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	Ves. Debtor District Debtor District	When When	MM / DD / YYYY	Relationship to you  Case number, if known  Relationship to you  Case number, if known
11.	Do you rent your residence?	No. Go to line 12	o. Statement About an Eviction		you want to stay in your residence?  t You (Form 101A) and file it with

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De	ebtor 1 Kieala First Name		Mid	Idle Name	Sanders Last Name	Case n	umber (if known)		
Pa	rt 3: Report About Any	Busir							
12.	Are you a sole proprietor of any full-		No.	Go to Part 4.					
	or part-time business?	<b>✓</b>	Yes.	Name and locat	tion of business				
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			Inspire Image Name of busined 5138 Washingto Number					
	If you have more than			Hillside City		Illinois State	60162 Zip Cod		
	one sole proprietorship, use a separate sheet and attach it to this			Check the app	oropriate box to des Care Business (as de	cribe your busines	es:	ie.	
	petition.			_	sset Real Estate (as				
					oker (as defined in 1		- , ,,		
				Commod	dity Broker (as define	ed in 11 U.S.C. §	101(6))		
				✓ None of	the above				
13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?  If you are filing under Chapter 11, the court must know whether you are a small business debtor so a appropriate deadlines. If you indicate that you are a small business debtor, you must attach your mode are you a small business debtor?					nch your most recent balance				
	For a definition of	<b>✓</b>	No.	I am not filing ur	nder Chapter 11.				
	small business debtor, see 11 U.S.C. § 101(51D).		No.		I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.				
			Yes.	I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.					
Pa	rt 4: Report if You Owr	n or H	ave A	ny Hazardous F	Property or Any P	roperty That Ne	eds Immediate Atte	ention	
14.	Do you own or have any property that poses or is alleged to	<b>✓</b>	No. Yes.	What is the hazard	<b>ታ</b> ?				
	pose a threat of imminent and identifiable hazard to			If immediate attent	tion is needed, why is	s it needed?			
	public health or safety? Or do you			Where is the prope	erty?				
	own any property that needs immediate attention?				Number	Street			
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?				City		State	Zip Code	

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Debtor 1 Kieala Sanders Case number (if known)
First Name Middle Name Last Name

#### Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: 15. Tell the court whether you have I received a briefing from an approved credit I received a briefing from an approved credit received briefing counseling agency within the 180 days before I counseling agency within the 180 days before I about credit filed this bankruptcy petition, and I received a filed this bankruptcy petition, and I received a counseling. certificate of completion. certificate of completion. Attach a copy of the certificate and the payment plan. Attach a copy of the certificate and the payment plan. The law requires that if any, that you developed with the agency. if any, that you developed with the agency. you receive a briefing about credit ☐ I received a briefing from an approved credit I received a briefing from an approved credit counseling before you counseling agency within the 180 days before I counseling agency within the 180 days before I file for bankruptcy. filed this bankruptcy petition, but I do not have a filed this bankruptcy petition, but I do not have a certificate of completion. certificate of completion. You must truthfully check one of the Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, following choices. If you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment you cannot do so, you are not eligible to file. I certify that I asked for credit counseling services I certify that I asked for credit counseling services from an approved agency, but was unable to from an approved agency, but was unable to If you file anyway, the obtain those services during the 7 days after I obtain those services during the 7 days after I court can dismiss your made my request, and exigent circumstances made my request, and exigent circumstances case, you will lose merit a 30-day temporary waiver of the merit a 30-day temporary waiver of the whatever filing fee you requirement. requirement. paid, and your creditors can begin To ask for a 30-day temporary waiver of the To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what requirement, attach a separate sheet explaining what collection activities efforts you made to obtain the briefing, why you were efforts you made to obtain the briefing, why you were again. unable to obtain it before you filed for bankruptcy, and unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this what exigent circumstances required you to file this Your case may be dismissed if the court is dissatisfied Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before with your reasons for not receiving a briefing before you filed for bankruptcy. you filed for bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed. If you do not do so, your case may be dismissed. Any extension of the 30-day deadline is granted only Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: Incapacity. I have a mental illness or a mental Incapacity. I have a mental illness or a mental deficiency that makes me deficiency that makes me incapable of realizing or making incapable of realizing or making rational decisions about finances. rational decisions about finances. My physical disability causes me to Disability. My physical disability causes me to Disability. be unable to participate in a be unable to participate in a briefing in person, by phone, or briefing in person, by phone, or through the internet, even after I through the internet, even after I reasonably tried to do so. reasonably tried to do so. Active duty. I am currently on active military Active duty. I am currently on active military duty in a military combat zone. duty in a military combat zone. If you believe you are not required to receive a briefing If you believe you are not required to receive a briefing about credit counseling, you must file a motion for about credit counseling, you must file a motion for waiver of credit counseling with the court. waiver of credit counseling with the court.

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Sanders Debtor 1 Kieala Case number (if known) Middle Name First Name Last Name Part 6: **Answer These Questions for Reporting Purposes** 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as 16. What kind of debts do incurred by an individual primarily for a personal, family, or household purpose." you have? No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. 17. Are you filing under No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Do you estimate that Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative after any exempt expenses are paid that funds will be available to distribute to unsecured creditors? property is excluded **V** No. and administrative expenses are paid that Yes. funds will be available for distribution to unsecured creditors? **7** 1-49 1,000-5,000 25,001-50,000 18. How many creditors 50-99 5,001-10,000 50,001-100,000 do you estimate that 100-199 10,001-25,000 More than 100,000 you owe? 200-999 \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 19. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your assets \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion to be worth? \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 20. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your liabilities to be? \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion Sign Below Part 7: I have examined this petition, and I declare under penalty of perjury that the information provided is true and For you correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. X X /s/ Kieala Sanders Signature of Debtor 1 Signature of Debtor 2 Executed on \_ 2/28/2017 Executed on MM / DD / YYYY MM / DD / YYYY

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Debtor 1 Kieala		Sanders	Case number (if	known)
First Name	Middle Name	Last Name		
For your attorney, if you are represented by one	eligibility to proceed und	ler Chapter 7, 11, 1	2, or 13 of title 11, Unite	nave informed the debtor(s) about d States Code, and have explained the also certify that I have delivered to the
If you are not	debtor(s) the notice requi	ired by 11 U.S.C. §	342(b) and, in a case in v	which § 707(b)(4)(D) applies, certify that I
represented by an	have no knowledge after	an inquiry that the	information in the sched	lules filed with the petition is incorrect.
attorney, you do not	4.5			
need to file this page.	/s/ Yisroel Y Moskov	rits	Date _	2/28/2017
	Signature of Attorney for	or Debtor		IM / DD / YYYY
	Yisroel Y Moskovits			
	Printed name			
	Semrad Law Firm			
	Firm name			
	10 N. Martingale Road			
	Street			
	Suite 400			
	Schaumburg		Illinois	60173
	City		State	Zip Code
	Contact phone	3122543191	Email address	imoskovits@semradlaw.com
			·	
			Illinois	3
	Bar number		State	

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Fill in this information to identify your case:								
Debtor 1	Kieala		Sanders					
	First Name	Middle Name	Last Name					
Debtor 2								
(Spouse, if filing)	First Name	Middle Name	Last Name					
United States E	Bankruptcy Court for the:	Northern	District of Illinois					
			(State)					
Case number (If known)								

	Check if	this	is	an
_	amende	d filir	ng	

### Official Form 106Sum

### Summary of Your Assets and Liabilities and Certain Statistical Information 12/1

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

	Your assets Value of what you own
Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$0.00
1a. Copy line 33, Total real estate, Irom Schedule AVD	ФЕ 057.00
1b. Copy line 62, Total personal property, from Schedule A/B	\$5,657.00 —
1c. Copy line 63, Total of all property on Schedule A/B	\$5,657.00
tt 2: Summarize Your Liabilities	
	Your liabilities
	Amount you owe
Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)	00.014.00
2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$6,314.00
Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)	\$0.00
3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$86,222.46
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$86,222.46
Your total liabilities	<u>·                                     </u>
Your total liabilities  art 3: Summarize Your Income and Expenses	<u>·                                     </u>
Your total liabilities  The Summarize Your Income and Expenses  Schedule I: Your Income (Official Form 106I)	<u>·                                     </u>
Your total liabilities  art 3: Summarize Your Income and Expenses	\$92,536.46
Your total liabilities  art 3: Summarize Your Income and Expenses  . Schedule I: Your Income (Official Form 106I)	\$92,536.46

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Debt	or 1 Kieala		Sanders	Case number (if known)					
	First Name	Middle Name	Last Name						
Part 4	Answer These Ques	stions for Administrati	ive and Statistical Records	S					
6. <b>A</b> r	e you filing for bankruptcy	under Chapters 7, 11, or	13?						
Г	No. You have nothing to r	eport on this part of the for	rm. Check this box and submit the	his form to the court with your other sch	edules.				
_ □	Yes.								
7. <b>W</b>	hat kind of debt do you hav	re?							
~			mer debts are those incurred by a ill out lines 8-10 for statistical put	an individual primarily for a personal,					
_		• ( )	·	part of the form. Check this box and sub	omit				
	this form to the court with		u have nothing to report on this	part of the form. Offeck this box and suc	· · · · · · · · · · · · · · · · · · ·				
o <b>-</b>		O at Manthly last and		h. in an an a fun an Official	<b>*</b> • • • • • • • • • • • • • • • • • • •				
	form 122A-1 Line 11; <b>OR</b> , Fo		e: Copy your total current month rm 122C-1 Line 14.	ly income from Official	\$1,046.81				
9.	Copy the following special	Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:							
	From Part 4 on Schedule E	/F, copy the following:		Total claim					
				\$0.00					
	9a. Domestic support obliga	ions (Copy line 6a.)		<u>:</u>					
	9b. Taxes and certain other of	lebts you owe the governn	nent. (Copy line 6b.)	\$0.00					
	9c. Claims for death or perso	nal injury while you were ir	ntoxicated. (Copy line 6c.)	\$0.00					
	9d. Student loans. (Copy line	e 6f )		\$71,510.00					
	,	,		\$0.00					
	<ol> <li>Obligations arising out of a separation agreement or priority claims. (Copy line 6g.)</li> </ol>		r divorce that you did not report a	as <u>+ · · · ·</u>					
				\$0.00					
	9f. Debts to pension or profi	-sharing plans, and other	similar debts. (Copy line 6h.)						

\$71,510.00

9g. Total. Add lines 9a through 9f.

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Fill in this	information to id	entify your ca	ase:						
					Occident				
Debtor 1	Kieala First Name	ı	Middle N	Jame	Sanders Last Name				
Debtor 2					2401.141.110				
(Spouse, if fil	First Name	1	Middle N	Name	Last Name				
United Sta	ates Bankruptcy C	ourt for the:	Northern		District of Illinois (State)				
Case num (If known)	ber				(Gualdy				
Officia	ıl Form 10	6A/B				_		Check if this is an amended filing	
Sched	dule A/B:	Prope	rty					12/1	
category v responsibl write your	where you think e for supplying o name and case	it fits best. B correct inform number (if ki	e as complete a nation. If more s nown). Answer e	nd ac space very o	asset only once. If an asset fits in m curate as possible. If two married pe is needed, attach a separate sheet t juestion. r Other Real Estate You Own or	eople are to this fo	e filing together, both a orm. On the top of any a	re equally	
			_						
	No. Go to Part 2	y legal or eq	uitable interest	ın any	residence, building, land, or similar	propert	y:		
ш	Yes. Where is the	e property?							
1.1					at is the property? Check all that apply	<b>'</b> .		claims or exemptions. Put red claims on <i>Schedule D:</i>	
1.1	Street address, if available, or other description				Single-family home		Creditors Who Have Claims Secured by Property.		
				ш	Duplex or multi-unit building Condominium or cooperative		Current value of the	Current value of the	
				-	Manufactured or mobile home		entire property?	portion you own?	
				ш	Land		·	<del></del> -	
	Number Str	eet		H	Investment property		Describe the nature o		
				H	Timeshare		interest (such as fee s the entireties, or a life		
	City	State	Zip Code	H	Other				
					has an interest in the property? Ch	eck	Check if this is co	mmunity property	
				one			$\sqcup$		
					Debtor 1 only Debtor 2 only				
				ш	Debtor 1 and Debtor 2 only				
				ш	At least one of the debtors and another				
				ш			bll		
					er information you wish to add about perty identification number:	t this ite	m, such as local		
If you	own or have mor	e than one, lis	t here:						
				Wha	at is the property? Check all that apply	<i>'</i> .		claims or exemptions. Put	
1.2	Street address, if	available or o	other description	Ш	Single-family home			red claims on Schedule D: nims Secured by Property.	
	ou our addition, ii	aranasio, 5. c	and decempation		Duplex or multi-unit building		Current value of the	Current value of the	
				ш	Condominium or cooperative		entire property?	portion you own?	
				ш	Manufactured or mobile home				
	Number Str	eet		ш	Land		Describe the nature o	f vour ownership	
					Investment property Timeshare		interest (such as fee s	simple, tenancy by	
	City	State	Zip Code		Other		the entireties, or a life	e estate), if Known.	
				ш			Check if this is co	mmunity property	
					has an interest in the property? Ch	eck	(see instructions)	, , , , , , , , , , , , , , , , , , ,	
				one					
					Debtor 1 only Debtor 2 only				
					Debtor 1 and Debtor 2 only				
				ш	At least one of the debtors and another				
							m ouch oo lees!		
					er information you wish to add about perty identification number:	t tills ite	iii, sucii as local		

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Debtor 1	Kieala First Name	Middle Name	Sanders Last Name	Case numbe	r (if known)	
1.3 <u>Stre</u>	et address, if available, or othe		What is the property? Check all that Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	apply.	the amount of any secu	claims or exemptions. Put red claims on Schedule D: ims Secured by Property.  Current value of the portion you own?
Nun	nber Street State	Zip Code	Land Investment property Timeshare Other	_	Describe the nature of interest (such as fee s the entireties, or a life	imple, tenancy by
		[ [ [	Who has an interest in the propert  Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and ar  Other information you wish to add	nother	Check if this is co (see instructions)	mmunity property
	the dollar value of the porti ve attached for Part 1. Writ	on you own for a e that number h	property identification number: all of your entries from Part 1, incl ere.			
Do you ow			t in any vehicles, whether they are			
	ns, trucks, tractors, sport utilit		also report it on Schedule G: Executo cycles	ory Contracts and	Unexpired Leases.	
3.1	Make Model: Year:		Who has an interest in the proone.  Debtor 1 only	perty? Check	the amount of any secu	claims or exemptions. Put ared claims on <i>Schedule D:</i> aims Secured by Property.
	Approximate mileage: Other information: 2008 Chevrolet Impala		Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors ar		Current value of the entire property? \$2752.00	Current value of the portion you own? \$2752.00
3.2	Make Model: Year:		who has an interest in the proone.  Debtor 1 only		the amount of any secu	claims or exemptions. Put tred claims on Schedule D: hims Secured by Property.
	Approximate mileage: Other information:		Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors at Check if this is community instructions)		Current value of the entire property?	Current value of the portion you own?

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	Kieala First Name	Middle Name	Sanders Last Name	Case number	ei (ii kilowii)	
3.3	Make Model: Year: Approximate mileage: Other information:		Who has an interest in the pone.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 onl At least one of the debtors Check if this is communicative instructions)	y and another	the amount of any secu	claims or exemptions. Pured claims on Schedule nims Secured by Property  Current value of the portion you own?
3.4	Make Model: Year: Approximate mileage: Other information:		Who has an interest in the pone.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 onl At least one of the debtors Check if this is communication.	y and another	the amount of any secu	claims or exemptions. Property and claims on Schedule in the secured by Property Current value of the portion you own?
\Mo+	araraft aircraft mater ha	maa ATVa and atha	r roorootional vahialaa athar	robiolog and ago	annarian	
Exar	nples: Boats, trailers, motors No Yes Make	•	er recreational vehicles, other of the fishing vessels, snowmobiles, me who has an interest in the p	otorcycle accessori	Do not deduct secured	claims or exemptions. Po
Exar	nples: Boats, trailers, motors No Yes	•	Who has an interest in the pone.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 onl At least one of the debtors	roperty? Check  y  and another	Do not deduct secured the amount of any secu	red claims on <i>Schedule</i>
4.1	nples: Boats, trailers, motors  No  Yes  Make  Model:  Year:  Approximate mileage:	•	Who has an interest in the pone.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 onl	roperty? Check  y and another ity property (see roperty? Check	Do not deduct secured the amount of any secu Creditors Who Have Cla  Current value of the entire property?  Do not deduct secured the amount of any secu	rred claims on Schedule nims Secured by Property Current value of the

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De	ebtor 1	Kieala First Name	Middle Name	Sanders Last Name	Case number (if known)	
Pa	rt 3:		our Personal and Household Iten			
D	o you	own or hav	e any legal or equitable interest i	in any of the following	ı items?	Current value of the portion you own?  Do not deduct secured claims or exemptions.
	Examp		and furnishings liances, furniture, linens, china, kitchenwa	are		
<u> </u>	No Yes. [	Describe	bed, dresser			\$150.00
		tronics les: Television	s and radios; audio, video, stereo, and di	igital equipment; computer	rs, printers, scanners; music	
<b>✓</b>	Yes. [	Describe	tv, laptop, camera, game console			\$375.00
	Examp		ue und figurines; paintings, prints, or other a in, or baseball card collections; other colle			
	No Yes. [	Describe				
		les: Sports, ph	rts and hobbies otographic, exercise, and other hobby ed s; carpentry tools; musical instruments	quipment; bicycles, pool ta	ables, golf clubs, skis; canoes	
<b>✓</b>	No Yes. [	Describe				
1	0. Fire	arms				
<b>✓</b>	Examp No	les: Pistols, rifl	es, shotguns, ammunition, and related e	equipment		
	Yes. [	Describe				
			clothes, furs, leather coats, designer wear	r, shoes, accessories		
<u> </u>	No Yes. [	Describe	clothing			\$300.00
		-	ewelry, costume jewelry, engagement ring r	gs, wedding rings, heirlooi	m jewelry, watches, gems,	
<u> </u>	No Yes. [	Describe	costume jewelry			\$75.00
		n-farm animal les: Dogs, cats	s s, birds, horses			1
<b>✓</b>	No Yes. [	Describe				
1	4. Any	other persor	al and household items you did not al	Iready list, including any	health aids you did not list	
<b>✓</b>	No Voc I	2000vil				1
Ш	Yes. [	Describe				
			lue of all of your entries from Part 3, i number here	including any entries for	pages you have attached	\$900.00

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Debtor 1 Kieala Sanders Case number (if known) Middle Name First Name Last Name Part 4: **Describe Your Financial Assets** Current value of the Do you own or have any legal or equitable interest in any of the following? portion you own? Do not deduct secured claims or exemptions. 16. **Cash** Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition **✓** No Yes ..... Cash: ..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. Institution name: fifth third bank \$2000.00 17.1. Checking account: \$5.00 17.2. Checking account: Business checking with PNC 17.3. Savings account: 17.4. Savings account: 17.5. Certificates of deposit: 17.6. Other financial account: 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No Institution or issuer name: Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture % of ownership: Name of entity Yes. Give specific information about

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Deb	tor 1 Kieala	Malalla Mara	Sanders	Case number (if known)	
20.	First Name  Government and corp	Middle Name orate bonds and other negotial	Last Name ble and non-negotiable	e instruments	
	Negotiable instruments	include personal checks, cashiers ents are those you cannot transfe	checks, promissory no	otes, and money orders.	
	✓ No			g er semening menn	
	Yes. Give specific				
	information about them	Issuer name:			
					_
		-			_
21.	Retirement or pension Examples: Interests in If		), thrift savings account	s, or other pension or profit-sharing plans	-
	√ No		.,		
	Yes. List each	Type of account:	Institution name:		
	account separately.	401(k) or similar plan:			
		Pension plan:			_
		IRA:			_
		Retirement account:			_
		Keogh:			_
		Additional account:			
		Additional account:			-
22.		prepayments d deposits you have made so that with landlords, prepaid rent, publi			
	✓ No		Institution name:		
	Yes	Electric:			
		Gas:			
		Heating oil:			
		Security deposit on rental unit:			_
		Prepaid rent:			_
		Telephone:			_
		Water:			_
		Rented furniture:			
		Other:			
23.	Annuities (A contract fo	or a periodic payment of money to	you, either for life or fo	or a number of years)	-
	✓ No	Issuer name and description:			
	Yes	2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.			
					-
					-
		-			

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Debt				ase number <i>(if known)</i>	
Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. § \$30(b)(1), \$29A(b), and \$29(b)(1).					
	Ins	stitution name and description. Separ	ately file the records of any interests.11	U.S.C. § 521(c):	
		First Name Middle Name Last Name revests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.  J.S.C. § \$ 530(b)(1), 529A(b), and 529(b)(1).  No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c):  Yes  sts, equitable or future interests in property (other than anything listed in line 1), and rights or powers recisable for your benefit  No Yes. Describe  ents, copyrights, trademarks, trade secrets, and other intellectual property  mples: Internet domain names, websites, proceeds from royallies and licensing agreements  No Yes. Describe  enses, franchises, and other general intangibles  mples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses  No Yes. Describe  or property owed to you?  Por property owed to you?  Por property owed to you  No Yes. Give specific information  about them, including whether you already filed the returns and the tax years			
0.5	Turete enritebl	First Name  Modes Name  Last Name  Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.  16 U.S.C. § \$ 500(b)(1), 599A(b), and 529(b)(1).  No  Vas  Institution name and description. Separately file the records of any interests. 11 U.S.C. § 521(c):    Vas   Institution name and description. Separately file the records of any interests. 11 U.S.C. § 521(c):    Vas   Vas   Vas   Vas. Describe   Vas. Give specific information and the tax years			
25.			ner than anything listed in line 1), a	nd rights or powers	
26.				is	
	<u> </u>				
	Tes. Describe				
27.				es, professional licenses	
	<b>✓</b> No				
	Yes. Describe				
Mor	ney or property	owed to you?			portion you own? Do not deduct secured
					portion you own? Do not deduct secured
	Tax refunds owed				portion you own? Do not deduct secured
	Tax refunds owed  ✓ No  ☐ Yes. Give spe	I to you		Federal:	portion you own? Do not deduct secured claims or exemptions.
	Tax refunds owed  ✓ No  ☐ Yes. Give spe about th you alrea	l to you  cific information em, including whether idy filed the returns			portion you own? Do not deduct secured claims or exemptions.  \$0.00
28.	Tax refunds owed  No Yes. Give spe about th you alre- and the	l to you  cific information em, including whether idy filed the returns		State:	portion you own? Do not deduct secured claims or exemptions.  \$0.00
28.	Tax refunds owed  No Yes. Give spe about th you alre- and the  Family support Examples: Past du	cific information em, including whether ady filed the returns tax years	port, child support, maintenance, divor	State: Local:	portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00
28.	Tax refunds owed  ✓ No  Yes. Give spe about th you alrea and the  Family support Examples: Past du  ✓ No	cific information em, including whether idy filed the returns iax years	port, child support, maintenance, divor	State:  Local: ce settlement, property settlement	portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00
28.	Tax refunds owed  ✓ No  Yes. Give spe about th you alrea and the  Family support Examples: Past du  ✓ No	cific information em, including whether idy filed the returns tax years	port, child support, maintenance, divor	State:  Local: ce settlement, property settlement Alimony:	portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00  t
28.	Tax refunds owed  ✓ No  Yes. Give spe about th you alrea and the  Family support Examples: Past du  ✓ No	cific information em, including whether idy filed the returns tax years	port, child support, maintenance, divor	State:  Local:  ce settlement, property settlement  Alimony:  Maintenance:	portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00  \$0.00  t  \$0.00 \$0.00
28.	Tax refunds owed  ✓ No  Yes. Give spe about th you alrea and the  Family support Examples: Past du  ✓ No	cific information em, including whether idy filed the returns tax years	port, child support, maintenance, divor	State: Local:  ce settlement, property settlement Alimony: Maintenance: Support:	portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00  \$0.00  t  \$0.00 \$0.00
29.	Tax refunds owed  No Yes. Give speabout the you alread the  Family support Examples: Past du  No Yes. Give spe	bific information em, including whether dy filed the returns lax years e or lump sum alimony, spousal sup bific information	port, child support, maintenance, divor	State: Local:  ce settlement, property settlement  Alimony:  Maintenance:  Support:  Divorce settlement:	portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00  t  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
29.	Tax refunds ower  ✓ No  Yes. Give spe about th you alre and the  Family support Examples: Past du  ✓ No  ☐ Yes. Give spe  Other amounts s Examples: Unpaid	bific information em, including whether idy filed the returns lax years e or lump sum alimony, spousal sup bific information	s, disability benefits, sick pay, vacation p	State: Local:  ce settlement, property settlement  Alimony:  Maintenance: Support: Divorce settlement: Property settlement:	portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00  t  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
29.	Tax refunds ower  ✓ No  Yes. Give spe about th you alre and the  Family support Examples: Past du  ✓ No  ☐ Yes. Give spe  Other amounts s Examples: Unpaid	cific information em, including whether ady filed the returns tax years e or lump sum alimony, spousal sup cific information	s, disability benefits, sick pay, vacation p	State: Local:  ce settlement, property settlement  Alimony:  Maintenance: Support: Divorce settlement: Property settlement:	portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00  t  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
29.	Tax refunds owed  ✓ No  Yes. Give spe about th you alre and the  Family support Examples: Past du  ✓ No  Yes. Give spe  Other amounts s Examples: Unpaid Social S	bific information em, including whether ady filed the returns tax years e or lump sum alimony, spousal sup bific information	s, disability benefits, sick pay, vacation p	State: Local:  ce settlement, property settlement  Alimony:  Maintenance: Support: Divorce settlement: Property settlement:	portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00  t  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00

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Deb <sup>1</sup>	tor 1 Kieala	Sanders	Case number (if known)	
	First Name Middle Na	ame Last Name		
31.	Interests in insurance policies  Examples: Health, disability, or life insurance;	health savings account (HSA); credit, ho	meowner's, or renter's insurance	
	Yes. Name the insurance company of each policy and list its value	Company name:	Beneficiary:	Surrender or refund value:
32.	Any interest in property that is due you frought from the beneficiary of a living trust, experimental because someone has died.		or are currently entitled to receive	
	✓ No Yes. Describe			
33.	Claims against third parties, whether or n Examples: Accidents, employment disputes,	= -	demand for payment	
	✓ No Yes. Describe			
34.	Other contingent and unliquidated claims to set off claims	s of every nature, including countercl	aims of the debtor and rights	
	✓ No Yes. Describe			
35.	Any financial assets you did not already li	st		
	✓ No Yes. Describe			
36.	Add the dollar value of all of your entries for Part 4. Write that number here		. • .	\$2005.00
	Describe Any Business Belated F	Descriptiv Vol. Over on House on India	overstand link over versloodste in Donk d	
Part	-		erest In. List any real estate in Part 1	•
37.	Do you own or have any legal or equitable	interest in any business-related prop		mant value of the
	No. Go to Part 6. Yes. Go to line 38.		por Do	rrent value of the rtion you own? not deduct secured claims exemptions
38.	Accounts receivable or commissions you	already earned		
	✓ No Yes. Describe			
39.	Office equipment, furnishings, and supplied Examples: Business-related computers, softw		hines, rugs, telephones, desks, chairs, electro	nic devices
	✓ No Yes. Describe			

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Deb		Sanders	Case number (if known)	
40.	Machinery, fixtures, e	quipment, supplies you use in business, and tools of you	r trade	
	<b>✓</b> No			
	Yes. Describe			
41.	Inventory			
	<b>√</b> No			
## Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here  ## Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here  ## Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here  ## Bory to you own or have an interest in familiand, list it in Part 1.  ## As O you own or have an interest in familiand, list it in Part 1.  ## Current value of the Part 7.  ## Current va				
	✓ No			
	<u> </u>	Name of entity:	% of ownership:	
43	Customer lists, mailing	lists, or other compilations		
	Yes. Do your lists in	nclude personally identifiable information (as defined in 11 U.	S.C. § 101(41A))?	
	□ No			
	<u></u>	rihe		
	les. Desc	ibe		<del></del>
44.	Any business-related	property you did not already list		
	—			
	lacksquare			<u> </u>
	iiiioiiiiatioii			<del>-</del>
				<del>-</del>
45. A	dd the dollar value of a	II of your entries from Part 5, including any entries for p	ages you have attached	
<u> </u>	Danasila Assat	Deleted December	V 0	
Pari			rou Own or Have an Interest in.	
46.	Do you own or have a	ny legal or equitable interest in any farm- or commercia		
	No. Go to Part 7.			
	Yes. Go to line 47.			
First Name   Modelle Name   Last Name				
First Name   Model Name   Last Name				
First Name    Modelhame   Lain Name   Modelhame   Lain Name   Modelhame   Modelhame   Lain Name   Yes. Describe   11. Inventory   No   Yes. Describe   12. Interests in partnerships or joint ventures   No   Yes. Describe   13. Interests in partnerships or joint ventures   No   Yes. Give specific information about them   Yes. Give specific information about them   Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?   No   Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?   No   Yes. Give specific information   Yes. Give specific information   Yes. Give specific information   Yes. Give specific information   Yes. Give specific information in familiard, list it in Part 1.   Yes. Give specific information   Yes. Give specific information information in familiard, list it in Part 1.   Yes. Give specific information or have an inferest in familiard, list it in Part 1.   Yes. Give specific information familiard, list it in Part 1.   Yes. Give specific information familiard, list it in Part 1.   Yes. Give specific information or have any legal or equitable interest in any farm- or commercial fishing-related property?   No Give specific information familiard, list it in Part 1.   Yes. Give specific information or exemptions or exe				
	<b>√</b> No			
	Yes. Describe			

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Debt				Case number (if known)		
48.			Last Ivallie			
First Name Middle Name Last Name						
49.	Crops-either growing or harvested					
	First Name   Last Name   Last Name   Last Name   Crops-either growing or harvested					
	Coppe-either growing or harvested					
50.	The street with the dollar value of all of your entries from Part 7, Write that number here  List the Totals of Each Part of this Form  List the Totals of Each Part of this Form  List the Totals of Each Part of this Form  List the Totals of Each Part of this Form  List the Totals of Each Part of this Form  List the Totals and property, line 45  List total lances seed, line 2  List total lances seed, line 2  List total lances seed, line 2  List total lances lances, line 6  List total lances and fishing-related property, line 45  H 6: Total famous and fishing-related property, line 52					
	<b>✓</b> No					
	Yes. Describe					
51.		rcial fishing-related property you did	not already list			
	_					
				u have attached		
<b>•</b>	or write that hamber					
Part	Ze Describe All Pro	nerty You Own or Have an Intere	est in That You Did Not	List Ahove		
				. 2.007.15070		
		s, country club membership				
54. A	dd the dollar value of al	I of your entries from Part 7. Write the	at number here		<b>&gt;</b>	
Part 8	8: List the Totals of	Each Part of this Form				
55. <b>F</b>	Part 1: Total real estate	, line 2		<b>&gt;</b>		
56. <b>r</b>	part 2 total vehicles, line	e 5	\$2752.00			
57. <b>P</b>	art 3: Total personal an	d household items, line 15				
58. <b>P</b>	art 4: Total financial as	sets, line 36				
59. <b>F</b>	Part 5: Total business-re	elated property, line 45				
60. <b>F</b>	Part 6: Total farm- and f	ishing-related property, line 52				
61. <b>F</b>	Part 7: Total other prope	erty not listed, line 54				
62. 1	Fotal personal property.	Add lines 56 through 61	\$5657.00	Copy personal property total	+ \$5657.00	
				and the second brokenships	<b>\$5657.00</b>	
63. <b>T</b>	otal of all property on S	chedule A/B. Add line 55 + line 62			\$5657.00	

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		Docu	ment Page 20 of 6	9	
Fill in this inf	formation to identify your case:				
Debtor 1	Kieala		Sanders		
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse, if filing	) First Name	Middle Name	Last Name		
Debtor 2   Species, If limity   First Name   Middle Name   Last Name   Last Name   District of Illinois   Case number (lifewort)					
Debtor 1   Kirola   Sanders   First Name   Middle Name   Last Na					
Debtor 1   Kleala   Senders   First Name   Middle Name   Last Na					
Officia	I Form 106C				Check if this is ar amended filing
Schedu	ile C: The Propert	y You Claim a	as Exempt		12/15
as exempt. additional properties are a spetthe amountax-exempted and a spetthe amountax-exempted a law your exempted 1. Which	If more space is needed, fill of pages, write your name and content of property you claim a cific dollar amount as exert of any applicable statutors tretirement funds—may be withat limits the exemption potion would be limited to the entify the Property You Classet of exemptions are you claim unare claiming state and federal	out and attach to this case number (if known sexempt, you must annot. Alternatively, you y limit. Some exempte unlimited in dollar atto a particular dollar e applicable statutorim as Exemptening? Check one only, end in nonbankruptcy exemptenses.	page as many copies of <i>Part</i> n).  specify the amount of the exput may claim the full fair man attions—such as those for heat amount. However, if you claim amount and the value of the ry amount.  It is a specific part of the page of t	2: Additional  memption you  ket value of  alth aids, righ  im an exemp  e property is	Page as necessary. On the top of any claim. One way of doing so is to the property being exempted up to its to receive certain benefits, and tion of 100% of fair market value
2. For any	property you list on Schedule	A/B that you claim as e	exempt, fill in the information be	low.	
line on	Schedule A/B that lists this	the portion you			Specific laws that allow exemption
		ФО ООО ОО	_		735 ILCS 5/12-1001(b)
		\$2,000.00	\$2,000.00		_
thi	rd bank			, up to any	
			applicable statutory limit		
		Φ5.00			735 ILCS 5/12-1001(b)
•		\$5.00	\$5.00		_
	siness checking with		100% of fair market value applicable statutory limit	, up to any	
Line fro Schedu					
	u claiming a homestead exemp		,375? cases filed on or after the date of a	ndivetment )	

No Yes

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

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Debtor 1 Kieala Sanders Case number (if known) Middle Name First Name Last Name Part 2: **Additional Page** Brief description of the property and Current value of Amount of the exemption you claim Specific laws that allow exemption line on Schedule A/B that lists this the portion you property own Check only one box for each exemption. Copy the value from Schedule A/B 735 ILCS 5/12-1001(c); 735 ILCS Brief \$2,752.00 description: 5/12-1001(b) **✓** \$0 , 2008 Chevrolet Impala 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 735 ILCS 5/12-1001(a) Brief \$300.00 description: **✓** \$300.00 clothing 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 735 ILCS 5/12-1001(b) Brief \$375.00 description: **✓** \$375.00 tv, laptop, camera, 100% of fair market value, up to any game console applicable statutory limit Line from Schedule A/B: 735 ILCS 5/12-1001(b) \$150.00 description: **✓** \$150.00 bed, dresser 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 06 735 ILCS 5/12-1001(b) Brief \$75.00 description: \$75.00

100% of fair market value, up to any

applicable statutory limit

costume jewelry

12

Line from

Schedule A/B:

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		Du	cument Page 22 of 6	09		
Fill in this info	rmation to identify your ca	se:				
Debtor 1	Kieala		Sanders			
	Riesla   Sanders					
Debtor 2 (Spouse, if filing)	Sanders   First Name   Middle Name   Last Name   Las					
	Kieala Sanders First Name Middle Name Last Name  District of Illinois (State)    Form 106D   Check if this is an amended filing search of the court with your other schedules. You have nothing else to report on this form. On the top of any additional pages, write your see number (if known).    Check his box and submit this form to the court with your other schedules. You have nothing else to report on this form.   Column A					
United States I	Sanders   First Name   Middle Name   Last Name   Las					
Case number	Sinformation to identify your case:					
(If known)	It is information to identify your case:  or 1 Kisala Sanders First Name Middle Name Last Name or 2 Set, if liting) First Name Middle Name Last Name and States Bankruptcy Court for the: Northem District of Illinois (State)  In number with  Check if this is an amended filling space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your and case number (if known).  Do any creditors have claims secured by your property?  No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.  Yes. Fill in all of the information below.  List All Secured Claims  List All Secured Claims. If a creditor has more than one secured claim, list the creditor's name.  Describe the property that secures the claim:  Describe the property that secures the claim:  Secured Claims  Secured by Property  12/15  Column A Mount of claim Do not deduct the value of collateral that supports will be contingent with the claim is: Check all that apply.  No. Check this box and submit this form the court with your other schedules. You have nothing else to report on this form.  Column B Value of Collateral value of collateral that supports that supports that supports that supports that supports that supports will be contingent.  Number Street  Describe the property that secures the claim:  Secured Claims  Secured by Secured Claims  Column B Value of Collateral value of collateral that supports.  As of the date you file, the claim is: Check all that apply.  Name Ca 92823  Secured Claims Can and Call that apply.  Name Call that apply.					
Official	Form 106D				Ц	
Schodi	ula D: Cradita	ore Who Hay	ve Claime Secure	d by Prop	ortv	
more space is	needed, copy the Additio			• •		
	•	oured by your proper	h.2			
_				vo nothing also to rope	ort on this form	
		Altion to identify your case:  Kleala Sanders First Name Middle Name Last Name  First Name Middle Name Last Name  First Name Middle Name Last Name  Inkruptcy Court for the: Northern District of Illinois (State)  COMM 106D  Check if this is an amended filling  Check if t				
✓ Yes.	. FIII In all of the information	1 Delow.				amended filing  12/15 information. If pages, write your  Column C Unsecured portion If any
Part 1: List	All Secured Claims					
separate in Part 2	ely for each claim. If more th	nan one creditor has a par	ticular claim, list the other creditors	Amount of claim Do not deduct the	Value of collateral	Unsecured portion
					this claim	
	a Nama	Describe the property	that secures the claim:	\$6,314.00	\$2,752.00	\$3,562.00
		072 Automobile				
Numi	ber Street	_	, the claim is: Check all that apply.			
		Contingent				
		Unliquidated				
		Disputed				
		Nature of lien. Check a	ıll that apply.			
Del	btor 2 only		made (such as mortgage or secured			
	•	Sanders   Middle Name   Last Name   Middle Name   Last Name   Middle Name   Last Name   Middle Name   Last Name   Middle Name   District of   Illinois   (State)     Check if this is an amended filling   Cors Who Have Claims Secured by Property   12/15				
			·			
Ch	eck if this claim relates	<b>=</b> ~				
		Last 4 digits of accou	nt number 4999			

Add the dollar value of your entries in Column A on this page. Write that number

here:

\$6,314.00

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Fill in th	s information to identify your	case:			
Debtor 1	Kieala		Sanders		
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, it	filing) First Name	Middle Name	Last Name		
United S	States Bankruptcy Court for the	: Northern	District of Illinois		
0	and the same		(State)		
Case nu (If known)	mber			_	
Offici	al Form 106E/F				Check if this is an amended filing
		- alitawa \A/la	Have Hassau	ad Olaimaa	
<u>Scn</u>	eaule E/F: Cr	editors who	Have Unsecu	irea Ciaims	12/15
other pa Form 10 claims tl the entri known).	rty to any executory contrac 6A/B) and on <i>Schedule G: Ex</i> nat are listed in <i>Schedule D:</i>	ts or unexpired leases that recutory Contracts and Une Creditors Who Hold Claims Attach the Continuation Pa	t could result in a claim. Also expired Leases (Official Form s Secured by Property. If mor	o list executory contracts on 106G). Do not include any re space is needed, copy the	NONPRIORITY claims. List the on Schedule A/B: Property (Official y creditors with partially secured ne Part you need, fill it out, number ite your name and case number (if
1. Do	any creditors have priority (	ınsecured claims against y	/ou?		
<b>✓</b>	No. Go to Part 2.				
	Yes.				
2. List	t all of your priority unsecur				

Total

claim

Priority

amount

Nonpriority

amount

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Debtor 1 Kieala Sanders Case number (if known) Middle Name First Name Last Name Part 2: List All of Your NONPRIORITY Unsecured Claims Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. **✓** Yes. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than four priority unsecured claims fill out the Continuation Page of Part 2. **Total claim** 4.1 Alpha Recovery Corp \$980.61 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 5660 Greenwood Plaza Blvd # 101 Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 80111 Colorado Englewood City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify \_\_\_ unsecured Is the claim subject to offset? Yes CAPITAL ONE 4.2 \$474.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 10/1/2012 P O Box 30253 Number As of the date you file, the claim is: Check all that apply. Contingent Salt Lake City Utah 84130 Unliquidated City State Zip Code Disputed Who incurred the debt? Check one. Debtor 1 only **|** Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify \_\_\_ CreditCard Is the claim subject to offset? **✓** No Yes CAPITAL ONE \$0.00 Last 4 digits of account number 7830 Nonpriority Creditor's Name When was the debt incurred? P O Box 30253 12/1/2008 Number As of the date you file, the claim is: Check all that apply. Contingent Salt Lake City Utah 84130 Unliquidated Zip Code City State Who incurred the debt? Check one. Disputed Debtor 1 only **|** Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts CreditCard Is the claim subject to offset? Other. Specify \_ No Yes

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Debtor 1 Kieala Sanders Case number (if known) Middle Name First Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.4 Comenity Bank \$767.83 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? Po Box 182124 Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 43218 Ohio City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar At least one of the debtors and another Check if this claim relates to a community debt Other. Specify \_\_\_ unsecured Is the claim subject to offset? **✓** No Yes Comenity Bank/Express \$767.00 Last 4 digits of account number \_ Nonpriority Creditor's Name When was the debt incurred? 10/1/2013 PO BOX 330066 Number As of the date you file, the claim is: Check all that apply. Contingent NORTHGLENN 80233 Colorado Unliquidated City State Zip Code Disputed Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts CreditCard Other. Specify \_ Is the claim subject to offset? **✓** No Yes COMENITY BANK/VCTRSSEC 4.6 \$112.00 Last 4 digits of account number Nonpriority Creditor's Name 220 W SCHROCK RD. When was the debt incurred? 8/1/2015 Number As of the date you file, the claim is: Check all that apply. Contingent 43081 Westerville Ohio Unliquidated City State Zip Code Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only

**✓** No Yes

At least one of the debtors and another

Is the claim subject to offset?

Check if this claim relates to a community debt

debts Other. Specify \_

Obligations arising out of a separation agreement or divorce that you did not report as priority claims

Debts to pension or profit-sharing plans, and other similar

CreditCard

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Debtor 1 Kieala Sanders Case number (if known) First Name Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** DEPT OF ED/NAVIENT 4.7 \$9,923.00 Last 4 digits of account number \_\_\_\_\_\_1016 Nonpriority Creditor's Name PO BOX 9635 When was the debt incurred? 10/1/2008 Number Street As of the date you file, the claim is: Check all that apply. Contingent WILKES BARRE Ponneylyania 10770

	Oit. Otata 7:0 Ocale	Unliquidated	
	City State Zip Code  Who incurred the debt? Check one.	Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	✓ Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar	
	Check if this claim relates to a community debt	debts	
	Is the claim subject to offset?	Other. Specify	
	✓ No		
	Yes		
4.8	DEPT OF ED/NAVIENT	Last 4 digits of account number 1001 _	\$9,384.00
	Nonpriority Creditor's Name PO BOX 9635	When was the debt incurred? 10/1/2009	
	Number Street		
		As of the date you file, the claim is: Check all that apply.	
	WILKES BARRE Pennsylvania 18773	Contingent	
	City State Zip Code	Unliquidated	
	Who incurred the debt? Check one.	Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	✓ Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or	
	At least one of the debtors and another	divorce that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	Other. Specify	
	✓ No	_	
	Yes		
4.9	DEPT OF ED/NAVIENT	Last 4 digits of account number 0131 _	\$7,607.00
	Nonpriority Creditor's Name PO BOX 9635	When was the debt incurred? 1/1/2013	
	Number Street		
		As of the date you file, the claim is: Check all that apply.	
	WILKES BARRE Pennsylvania 18773	Contingent	
	City State Zip Code	Unliquidated	
	Who incurred the debt? Check one.	Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	✓ Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or	
	At least one of the debtors and another	divorce that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	Other. Specify	
	✓ No		
	Yes		
	<del>_</del>		

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Debtor 1 Kieala Sanders Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** DEPT OF ED/NAVIENT 4.10 \$6,730.00 Last 4 digits of account number Nonpriority Creditor's Name PO BOX 9635 When was the debt incurred? 9/1/2013 Number Street As of the date you file, the claim is: Check all that apply. Contingent WILKES BARRE Pennsylvania 18773 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify \_ Is the claim subject to offset? **✓** No Yes 4.11 DEPT OF ED/NAVIENT \$5,992.00 Last 4 digits of account number 0922 Nonpriority Creditor's Name PO BOX 9635 When was the debt incurred? 9/1/2010 Number Street As of the date you file, the claim is: Check all that apply. Contingent WILKES BARRE Pennsylvania 18773 Unliquidated Zip Code City State Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify \_ Is the claim subject to offset? **✓** No Yes DEPT OF ED/NAVIENT 4.12 \$5,659.00 Last 4 digits of account number Nonpriority Creditor's Name PO BOX 9635 When was the debt incurred? 7/1/2011 Number As of the date you file, the claim is: Check all that apply. Contingent WILKES BARRE 18773 Pennsylvania Unliquidated City Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify Is the claim subject to offset? No

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Debtor 1 Kieala Sanders Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** DEPT OF ED/NAVIENT 4.13 \$4,602.00 Last 4 digits of account number Nonpriority Creditor's Name PO BOX 9635 When was the debt incurred? 9/1/2013 Number Street As of the date you file, the claim is: Check all that apply. Contingent WILKES BARRE Pennsylvania 18773 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify \_ Is the claim subject to offset? **✓** No Yes 4.14 DEPT OF ED/NAVIENT \$4,590.00 Last 4 digits of account number 0131 Nonpriority Creditor's Name PO BOX 9635 When was the debt incurred? 1/1/2013 Number Street As of the date you file, the claim is: Check all that apply. Contingent WILKES BARRE Pennsylvania 18773 Unliquidated Zip Code City State Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify \_ Is the claim subject to offset? **✓** No Yes DEPT OF ED/NAVIENT 4.15 \$3,581.00 Last 4 digits of account number Nonpriority Creditor's Name PO BOX 9635 When was the debt incurred? 10/1/2008 Number As of the date you file, the claim is: Check all that apply. Contingent WILKES BARRE 18773 Pennsylvania Unliquidated City Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify Is the claim subject to offset? No

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Debtor 1 Kieala Sanders Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** DEPT OF ED/NAVIENT 4.16 \$3,575.00 Last 4 digits of account number Nonpriority Creditor's Name PO BOX 9635 When was the debt incurred? 10/1/2009 Number Street As of the date you file, the claim is: Check all that apply. Contingent WILKES BARRE Pennsylvania 18773 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify \_ Is the claim subject to offset? **✓** No Yes 4.17 DEPT OF ED/NAVIENT \$3,052.00 Last 4 digits of account number 0922 Nonpriority Creditor's Name PO BOX 9635 When was the debt incurred? 9/1/2010 Number Street As of the date you file, the claim is: Check all that apply. Contingent WILKES BARRE Pennsylvania 18773 Unliquidated Zip Code City State Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify \_ Is the claim subject to offset? **✓** No Yes DEPT OF ED/NAVIENT 4.18 \$3,039.00 Last 4 digits of account number Nonpriority Creditor's Name PO BOX 9635 When was the debt incurred? 7/1/2011 Number As of the date you file, the claim is: Check all that apply. Contingent WILKES BARRE 18773 Pennsylvania Unliquidated City Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify Is the claim subject to offset? No

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Debtor 1 Kieala Sanders Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.19 **DEPT OF ED/NAVIENT** \$2,755.00 Last 4 digits of account number Nonpriority Creditor's Name PO BOX 9635 When was the debt incurred? 11/1/2014 Number Street As of the date you file, the claim is: Check all that apply. Contingent Pennsylvania WILKES BARRE 18773 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify \_ Is the claim subject to offset? **✓** No Yes 4.20 DEPT OF ED/NAVIENT \$1,021.00 Last 4 digits of account number 0224 Nonpriority Creditor's Name PO BOX 9635 When was the debt incurred? 2/1/2010 Number Street As of the date you file, the claim is: Check all that apply. Contingent WILKES BARRE 18773 Pennsylvania Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify \_ Is the claim subject to offset? **✓** No Yes JEFFERSON CAPITAL SYST 4.21 \$980.00 Last 4 digits of account number Nonpriority Creditor's Name 16 MCLELAND RD When was the debt incurred? 10/1/2016 Number As of the date you file, the claim is: Check all that apply. Contingent SAINT CLOUD 56303 Minnesota Unliquidated City Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify 001 UnknownLoanType Is the claim subject to offset? No

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Debtor 1 Kieala Sanders Case number (if known) Middle Name First Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** NAVIENT SOLUTIONS INC 4.22 \$0.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 10/1/2009 P.O. Box 9430 Street As of the date you file, the claim is: Check all that apply. attn: Bankruptcy Litigation Unit E3149-Cathy T Sedam Contingent Pennsylvania 18773 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify \_ Is the claim subject to offset? Yes 4.23 Recovery Management Services \$0.00 Last 4 digits of account number Nonpriority Creditor's Name Po Box 505 When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Michigan 48451 Linden City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify unsecured Is the claim subject to offset? **✓** No Yes The Illinois Institute of Art - Schaumburg 4.24 \$10,631.02 Last 4 digits of account number Nonpriority Creditor's Name 1000 Plaza Dr #100 When was the debt incurred? n/a Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Schaumburg 60173 Illinois Zip Code Disputed State Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify Unsecured Is the claim subject to offset? **✓** No

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 Debtor 1 First Name
 Kleala Sanders Middle Name
 Sanders Last Name
 Case number (if known)

#### Part 4: Add the Amounts for Each Type of Unsecured Claim Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim. **Total claims** \$0.00 Total claims 6a. Domestic support obligations. from Part 1 \$0.00 6b. Taxes and certain other debts you owe the government \$0.00 6c. Claims for death or personal injury while you were intoxicated \$0.00 6d. Other. Add all other priority unsecured claims. Write that amount here. \$0.00 6e. Total. Add lines 6a through 6d. 6e. **Total claims** \$71,510.00 **Total claims** 6f. Student loans from Part 2 \$0.00 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims \$0.00 6h. Debts to pension or profit-sharing plans, and other similar \$14,712.46 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. \$86,222.46 6j. Total. Add lines 6f through 6i.

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Fill in this infor	mation to identify your c	ase:		
Debtor 1	Kieala		Sanders	
	First Name	Middle Name	Last Name	,
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States E	Bankruptcy Court for the:	Northern	District of Illinois (State)	
Case number (If known)			(Glate)	

### Official Form 106G

### Check if this is an amended filing

### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

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		D0	cument ragi	C 34 01 03	
Fill in this infor	rmation to identify your ca	ase:			
Debtor 1	Kieala		Sanders		
Debtor 2	First Name	Middle Name	Last Name		
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States I	Bankruptcy Court for the:	Northern	District of Illinois		
Case number			(State)		
(If known)	-			<u> </u>	
					heck if this is an nended filing
Official	Form 106H				_
Schedul	e H: Your Cod	lebtors			12/15
•	, ,	u are filing a joint case, do	not list either spouse as	a codebtor.)	
Idaho, Lo	uisiana, Nevada, New Mex	lived in a community pro ico, Puerto Rico, Texas, W		? (Community property states and territories include Arizonin.)	a, California,
	Go to line 3.	r an auga or lagal aguitya	lant live with you at the	time?	
☐ Yes	. Dia your spouse, iorme No	r spouse, or legal equiva	lient live with you at the	urrie?	
		y state or territory did you	ı live?	Fill in the name and current address of that person.	
	Name of your spouse, for	ormer spouse, or legal equ	ivalent	<u></u>	
	Number Street			<del></del>	
	City	State	Zip Co	ode	
2 In Col	. 4 link all afvavor	toro Do not include		rif your spause is filing with you. List the person shown	in line O

again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

Column 1: Your codebtor

Official Form 106H Schedule H: Your Codebtors page 1

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				3			
Fill in	this information to identi	fy your case:					
Debto	or 1 Kieala		Sande	rs			
	First Name	Middle Name	Last Na	ame	Che	eck if this is:	
Debto	or 2 e, if filing) First Name	Middle Name	Loot No	ama	— I п	An amended filing	
			Last Na	-		A supplement showing p	nost-natition chanter 13
United the:	d States Bankruptcy Court for	or <u>Northern</u>	_ District of Illin			expenses as of the follow	
	number		(3)	tate)			
(If know	vn)					MM / DD / YYYY	
Offi	cial Form 106I						
Sch	edule I: Your I	ncome					12/15
inform spouse	nation about your spouse e. If more space is need er (if known). Answer ev		d your spous	e is not fili	ng with you, do	not include informati	on about your
1. Fi	ill in your employment		Debtor 1			Debtor 2	
	formation.						
	If you have more than one job,	Employment status	<b>✓</b> Employ			Employed	
	tach a separate page with formation about additional		Not Em	nployed		Not Employed	
	nployers.	Occupation	Self-emplo	yment		_	
	clude part time, seasonal, or	Employer's name					
se	elf-employed work.	Employer's address					
	ccupation may include studen r homemaker, if it applies.	t	Number Stre	eet		Number Street	
			City		State Zip Code	City	State Zip Code
			City		state Zip Code	City	State Zip Code
		How long employed there?					
Part	2: Give Details About	Monthly Income					
Estin	nate monthly income as o	of the date you file this form	<b>n</b> . If you have i	nothing to re	eport for any line	write \$0 in the space. Inc	elude vour non-filing
spou	ise unless you are separated	d.	-			•	
	u or your non-filing spouse h e space, attach a separate s	ave more than one employer, heet to this form.	combine the i			or that person on the line:  For Debtor 2 or	s below. If you need
				Fo	or Debtor 1	non-filing spouse	
		salary, and commissions (befo hly, calculate what the monthly		2.	\$0.00		-
3.	Estimate and list monthly o	vertime pay.		3.	+ \$0.00		_
4.	Calculate gross income. Ad	d line 2 + line 3.		4.	\$0.00		
						L	<del></del>

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Debtor 1Kieala First Name	Middle Name Last	ders Name	Case number known)	(if	
The trians	made rand		For Debtor 1	For Debtor 2 or non-filing spouse	
Copy line 4 here		<b>→</b> 4.	\$0.00		
5. List all payroll deductions:					
5a. Tax, Medicare, and Social S	ecurity deductions	5a.	\$0.00		
5b. Mandatory contributions for	retirement plans	5b.	\$0.00		
5c. Voluntary contributions for r	etirement plans	5c.	\$0.00		
5d. Required repayments of reti	rement fund loans	5d.	\$0.00		
5e. <b>Insurance</b>		5e.	\$0.00		
5f. Domestic support obligation	s	5f.	\$0.00		
5g. <b>Union dues</b>		5g.	\$0.00		
5h. Other deductions. Specify: _		5h. +	\$0.00 +		
6. Add the payroll deductions. Add +5h.	lines $5a + 5b + 5c + 5d + 5e + 5f + 5$	5g 6.	\$0.00		
7. Calculate total monthly take-ho	me pay. Subtract line 6 from line 4.	7.	\$0.00		
8. List all other income regularly re	eceived:				
8a. Net income from rental prop business, profession, or farm	1				
Attach a statement for each progress receipts, ordinary and not the total monthly net income.	ecessary business expenses, and	8a.	\$170.00		
8b. Interest and dividends		8b.	\$0.00		
8c. Family support payments the dependent regularly receive					
Include alimony, spousal supp divorce settlement, and proper	oort, child support, maintenance, ty settlement.	8c.	\$121.00		
8d. Unemployment compensation	on	8d.	\$396.00		
8e. Social Security		8e.	\$0.00		
8f. Other government assistance Include cash assistance and th cash assistance that you receiv under the Supplemental Nutritic housing subsidies Specify:	e value (if known) of any non- e, such as food stamps (benefits	8f.	\$0.00		
8g. Pension or retirement incor	ne	8g.	\$0.00		
8h. Other monthly income. Spec	sify:	8h. +	\$0.00 +		
9. Add all other income Add lines 8	a + 8b + 8c + 8d + 8e + 8f +8g + 8h	. 9.	\$687.00		
10. Calculate monthly income. Add Add the entries in line 10 for Debto	line 7 + line 9. or 1 and Debtor 2 or non-filing spous	10. se	\$687.00 +		= \$687.00
friends or relatives.	Itions to the expenses that you list married partner, members of your hou dy included in lines 2-10 or amounts	usehold, your	dependents, your roomm		
Specify:					11. + \$0.00
12. Add the amount in the last color Write that amount on the Summai	umn of line 10 to the amount in lin y of Schedules and Statistical Summ				12. \$687.00  Combined
13. Do you expect an increase or d	lecrease within the year after you	file this form	?		monthly income
Yes. Explain:					

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Debtor 1Kieala		Sand	ders		Case number (if	
First Name	Middle Name	Last	Name		known)	_
Official Form 106I. Additiona	ıl page.					
8a.Net income from rental property and	from operating a busin	ess, p	orofession, o	farm		
8a.1 Business and Self Employment	Deb	tor 1	Debtor 2			
Gross receipts (before all deductions)	<u>\$512</u>	2.00				
Ordinary and necessary operating expen-	ses - <u>\$34</u> 2	2.00				
Net monthly income from a business, pr	ofession, or farm \$17	0.00		Copy here	\$170.00	 

Official Form 106l Schedule I: Your Income page 3

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		Docu	ment Page 38 of 69	)		
Fill in this infor	mation to identify	your case:				
Debtor 1	Kieala First Name	Middle Name	Sanders Last Name			
Debtor 2	T iiot raino	Wildale Hamo	Edot Hamo	Check if this is:		
(Spouse, if filing)	First Name	Middle Name	Last Name	An amended fili	ng	
United States E	Bankruptcy Court f	or the: Northern [	District of Illinois (State)		howing post-petition chathe following date:	apter 13
Case number			(State)		<del> </del>	
(If known)				MM / DD / YYY	Y	
<u>Official</u>	Form 10	<u>6J</u>				
Schedul	e J: Your	Expenses				12/15
information. If (if known). Ans						
1. Is this a joi		ociloid				
	to line 2					
		in a separate household?				
	¬ No	u copulato nouconolu.				
	_	must file Official Forms 106J-2, <i>Exper</i>	nses for Separate Household of Debt	or 2.		
2. Do you hav	e dependents?	No				
Do not list D Debtor 2.	ebtor 1 and	Yes. Fill out this information for each dependent	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent liv	е
			Child	_	☐ No.  ✓ Yes.	
expenses of	enses include f people other	✓ No				
than yourself and dependents	-	Yes				
Part 2: Estin	mate Your Ong	joing Monthly Expenses				
_	of a date after the	our bankruptcy filing date unless y bankruptcy is filed. If this is a sup	•	•	-	
	•	non-cash government assistance uded it on Schedule I: Your Income	-		Your exp	enses
	or home owners	ship expenses for your residence. In t. 4.	clude first mortgage payments and		4.	\$0.00
	uded in line 4:					
4a. Real es	state taxes				40	\$0.00

\$0.00

\$0.00

\$0.00

4b.

4c.

4d.

4b. Property, homeowner's, or renter's insurance

4c. Home maintenance, repair, and upkeep expenses

4d. Homeowner's association or condominium dues

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Debtor 1 Kieala Sanders Case number (if known)
First Name Middle Name Last Name

First Name	Middle Name Last Name		
			Your expenses
5. Additional mortgage payme	ents for your residence, such as home equity loans	5.	\$0.00
6. Utilities:			
6a. Electricity, heat, natural ga	as	6a.	\$0.00
6b. Water, sewer, garbage co	llection	6b.	\$0.00
6c. Telephone, cell phone, In	ternet, satellite, and cable services	6c.	\$70.00
6d. Other. Specify:		6d	\$0.00
7. Food and housekeeping sup	pplies	7.	\$100.00
8. Childcare and children's ed	ucation costs	8.	\$0.00
9. Clothing, laundry, and dry o	leaning	9.	\$20.00
10. Personal care products ar	nd services	10.	\$15.00
11. Medical and dental expen	ses	11.	\$10.00
12. <b>Transportation.</b> Include gas Do not include car payment		12.	\$80.00
13. Entertainment, clubs, reci	eation, newspapers, magazines, and books	13.	\$0.00
14. Charitable contributions a	nd religious donations	14.	\$26.00
15. <b>Insurance.</b> Do not include insurance dec	lucted from your pay or included in lines 4 or 20.		
15a. Life insurance		<b>15a</b>	\$0.00
15b. Health insurance		15b	\$0.00
15c. Vehicle insurance		15c	\$85.00
15d. Other insurance. Specify	/ <u>:</u>		\$0.00
16. Taxes. Do not include taxes	deducted from your pay or included in lines 4 or 20.		
Specify:		16	\$0.00
17. Installment or lease paym	ents:	10	
17a. Car payments for Vehicl		17a	\$267.00
17b. Car payments for Vehic	e 2	17b	\$0.00
17c. Other. Specify:			\$0.00
17d. Other. Specify:			\$0.00
	, maintenance, and support that you did not report a	as deducted from	\$0.00
	ıle I, Your Income (Official Form 106I).	18.	
	to support others who do not live with you.		** **
Specify:	an not included in lines A ou E of this forms ou on Coh	19.	\$0.00
20a. Mortgages on other pro	es not included in lines 4 or 5 of this form or on Sch	edule I: Your Income.	\$0.00
20b. Real estate taxes.	r · · ·	20a 20b	\$0.00
20c. Property, homeowner's	or renter's insurance		
20d. Maintenance, repair, and		20c	\$0.00
20e. Homeowner's association		20d	\$0.00
206. Homeowner 5 association	on of condominant dues	20e	\$0.00

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Debtor 1 K			Sanders	Case number (if known)		
F	irst Name	Middle Name	Last Name			
21. <b>Other.</b>	Specify:				21	\$0.00
	ate your monthly	•				\$673.00
22a. Ad	ld lines 4 through 2	21.			_	\$0.00
	,	ly expenses for Debtor 2), if any,			_	\$673.00
22c. Ad	ld line 22a and 22b	o. The result is your monthly exp	enses.	:	22.	
23. Calcula	ate your monthly r	net income.				
23a. Co	ppy line 12 (your co	ombined monthly income) from S	Schedule I.	2	23a _	\$687.00
23b. Co	opy your monthly e	expenses from line 22 above.		2	23b	\$673.00
		y expenses from your monthly in	icome.			\$14.00
Th	ne result is your mo	onthly net income.		2	23c	· .
24 Do voi	ı exnect an increa	ase or decrease in your expens	ses within the vear after v	you file this form?		
-	•					
		ect to finish paying for your car le rease or decrease because of a n				
				you mongago.		
☐ No	)					
<b>✓</b> Ye	s					
_	Explain here					
		s with father who covers almost	all living expenses			
	405101 11700	Will facility wife obviole aimeet	an inving expended.			

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Fill in this infor	mation to identify your ca	ase:			
Debtor 1	Kieala		Sanders		
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States E	Bankruptcy Court for the:	Northern	District of Illinois (State)		
Case number			(-1311-)		

#### Official Form 106Dec

#### Check if this is an amended filing

#### **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Par	t 1: Sign Below								
Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?									
	✓ No								
	Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).							
	Under penalty of perjury, I declare that I have read the summary	and schedules filed with this declaration and							
	that they are true and correct.								
×	/s/ Kieala Sanders	×							
	Signature of Debtor 1	Signature of Debtor 2							
	Date 2/28/2017	Date							
	MM/DD/YYYY	MM/DD/YYYY							

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Fill in this info	rmation to identify your o	case:					
Debtor 1	Kieala		Sanders				
20210	First Name	Middle N		e			
Debtor 2 (Spouse, if filing)	First Name	Middle N	Name Last Nam	<u>e</u>			
United States I	Bankruptcy Court for the:	Northern	District of Illino				
Case number			(State	e)			
(If known)					_		Check if this is a
Official	Form 107						amended filing
Stateme	ent of Financia	al Affairs f	or Individuals	Filina for	Bankru	ıptcv	12/1
information. number (if kn	If more space is neede nown). Answer every q	ed, attach a sepa uestion.	arried people are filing tarate sheet to this form	On the top of			
			and Where You Lived	before			
1. What is	your current marital st	atus?					
	arried						
✓ NO	t married						
☐ No	1	-	e other than where you lives of the state of		W.		
De	btor 1:		Dates Debtor 1 lived there	Debtor 2:			Dates Debtor 2 lived there
				Same as [	Debtor 1		Same as Debtor 1
113	25 N Sterling Ave 202			ш			
	mber Street		From <u>03/2014</u>	Number Street			From
			To <u>02/2016</u>				То
Pal City	atine Illinois y State	Zip Code		City	State	Zip Code	
				Same as I	Debtor 1		Same as Debtor 1
Nu	mber Street		From	Number Street	:		From
City	y State	Zip Code		City	State	Zip Code	
			ouse or legal equivalent iana, Nevada, New Mexico,				
✓ No Yes.	Make sure you fill out S	chedule H: Your	Codebtors (Official Form	106H).			

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Sanders

Debtor 1 Kieala Case number (if known) Middle Name First Name Last Name Part 2: Explain the Sources of Your Income Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. Yes. Fill in the details. **Debtor 1** Debtor 2 Sources of income Sources of income **Gross income Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions and exclusions) exclusions) ✓ Wages, Wages, \$700.00 From January 1 of current year until commissions, commissions, the date you filed for bankruptcy: bonuses, tips bonuses, tips Operating a Operating a business business Wages, \$9000.00 Wages, For last calendar year: commissions, commissions, 2016 (January 1 to December 31, bonuses, tips bonuses, tips YYYY Operating a Operating a business business Wages, Wages, \$3492.00 For the calendar year before that: commissions. commissions. (January 1 to December 31, 2015) bonuses, tips bonuses, tips Operating a Operating a business business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income Sources of income Gross income from Gross income from Describe below. each source Describe below. each source (before deductions (before deductions and exclusions) and exclusions) Estimated child support \$623.00 From January 1 of current year until Estimated child support \$209.54 the date you filed for bankruptcy: unemployment benefits \$396.00 Estimated child support \$865.04 For last calendar year: (January 1 to December 31, 2016 For the calendar year before that: (January 1 to December 31, 2015

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Debtor 1 Kieala Sanders \_ Case number (if known) Middle Name Last Name List Certain Payments You Made Before You Filed for Bankruptcy Part 3: 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425\* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. \* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of payment Total amount paid Amount you still owe Was this payment for... WFDS Mortgage 02/2017 \$950.00 \$6314.00 Creditor's Name Car **V** PO BOX 19657 Credit card Number Street Loan repayment **IRVINE** California 92623 Suppliers or City State Zip Code vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors

Other

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	Kieala				nders	Case number	(II KNOWN)
	First Name		Middle Name	Las	t Name		
sio orp ger	ders include your porations of whic	relatives; a h you are a for a busin	iny general partner in officer, director, ness you operate a	s; relatives of any person in control,	general partners; part or owner of 20% or	nerships of which y more of their voting	who was an insider? ou are a general partner; g securities; and any managing domestic support obligations,
	No Voc List all pay	monto to	an incidor				
✓	Yes. List all pay	ments to a	an insider.	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
	Willson-Loury, Kin Insider's Name	nberly		02/2017	\$100.00	\$580.00	personal loan
	5138 Washington	Street					
	Number Street	Olicot					
	Hillside	Illinois	60162				
-	City	State	Zip Code				
	Insider's Name			_	·		
	Number Street						
	City	State	Zip Code				
Inclu	No	_	ranteed or cosigne	·			
				Dates of payment	Total amount paid	Amount you still owe	Reason for this payment  Include creditor's name
	Insider's Name					<del>-</del>	
	Insider's Name  Number Street					<del>-</del>	
		State	Zip Code			<del>-</del>	
	Number Street	State	Zip Code			<del>-</del>	
_	Number Street  City  Insider's Name	State	Zip Code			<del>-</del>	
_	Number Street  City	State	Zip Code			<del>-</del>	

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Debtor 1 Kieala Sanders Case number (if known) Middle Name First Name Last Name Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No ◪ Yes. Fill in the details. Status of the case Nature of the case Court or agency Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Value of the Describe the property Date property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied. Describe the property Date Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied.

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Debt	tor 1 Kieala	Sanders	Case number (if known)	
	First Name Middle Name	Last Name		
11.	Within 90 days before you filed for bankruptcy, did accounts or refuse to make a payment because you No		pank or financial institution, set off any am	ounts from your
	Yes. Fill in the details.			
		Describe the action th	e creditor took  Date action was taken	Amount
	Creditor's Name			-
	Number Street			
		Last 4 digits of account	number: XXXX-	
	City State Zip Code			
12.	Within 1 year before you filed for bankruptcy, was a appointed receiver, a custodian, or another official		possession of an assignee for the benefit o	of creditors, a court-
	✓ No ☐ Yes			
Part	5: List Certain Gifts and Contributions			
13.	Within 2 years before you filed for bankruptcy, did	you give any gifts with a t	otal value of more than \$600 per person?	
	No	you give any gints with a t	otal value of more than 4000 per person.	
	Yes. Fill in the details for each gift.			
	Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift			
	Number Street			
	City State Zip Code			
	Person's relationship to you			
	Person to Whom You Gave the Gift			
	Number Street			
	City State Zip Code  Person's relationship to you			
	reison s relationship to you			

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	Kieala	Sanders	Case number (if known)	
	First Name Middle Name	Last Name		
4. Wi	thin 2 years before you filed for bankruptc	y, did you give any gifts or contrib	utions with a total value of more than \$6	00 to any charity?
<b>✓</b>	No			
Ě	4	ribution		
	Yes. Fill in the details for each gift or cont	ribution.		
	Gifts or contributions to charities	Describe what you cont		Value
	that total more than \$600		contributed	
	Charity's Name			_
	Officially 5 Name			
	Number Street			
	Number Street			
	City State Zip Code			
	Oity State Zip Gode			
art 6:	List Certain Losses			
				-
	Yes. Fill in the details.  Describe the property you lost and how the loss occurred	Describe any insurance Include the amount that i	nsurance has paid. List loss	r Value of property
		pending insurance claims	on line 33 of Schedule	
		A/B: Property.		
				_
art 7:	List Certain Payments or Transfers			
ab	thin 1 year before you filed for bankruptcy, out seeking bankruptcy or preparing a ban clude any attorneys, bankruptcy petition prepar	nkruptcy petition?		to anyone you consulted
	nade arry attorneys, barriaptcy petition prepar			
			,	
	] No		, , , , , , , , , , , , , , , , , , , ,	
J		,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
✓				nt Amount of
✓		Description and value of transferred	any property Date paymer or transfer	nt Amount of payment
<b>✓</b>	Yes. Fill in the details.	Description and value of transferred	any property Date payme or transfer was made	payment
✓	Yes. Fill in the details.  Semrad Law Firm	Description and value of transferred  Attorney's Fee \$500.00 p	any property Date payme or transfer was made	
<b>✓</b>	Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid	Description and value of transferred	any property Date payme or transfer was made	payment
<b>✓</b>	Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 10 N. Martingale Road	Description and value of transferred  Attorney's Fee \$500.00 p	any property Date payme or transfer was made	payment
✓	Yes. Fill in the details.  Semrad Law Firm  Person Who Was Paid  10 N. Martingale Road  Number Street	Description and value of transferred  Attorney's Fee \$500.00 p	any property Date payme or transfer was made	payment
✓	Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 10 N. Martingale Road	Description and value of transferred  Attorney's Fee \$500.00 p	any property Date payme or transfer was made	payment
✓	Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 10 N. Martingale Road Number Street Suite 400	Description and value of transferred  Attorney's Fee \$500.00 p	any property Date payme or transfer was made	payment
✓	Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 10 N. Martingale Road Number Street Suite 400 Schaumburg Illinois 60173	Description and value of transferred  Attorney's Fee \$500.00 p 500.00	any property Date payme or transfer was made	payment
✓	Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 10 N. Martingale Road Number Street Suite 400 Schaumburg Illinois 60173	Description and value of transferred  Attorney's Fee \$500.00 p 500.00	any property Date payme or transfer was made	payment
✓	Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 10 N. Martingale Road Number Street Suite 400 Schaumburg Illinois 60173 City State Zip Code	Description and value of transferred  Attorney's Fee \$500.00 p 500.00	any property Date payme or transfer was made	payment
✓	Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 10 N. Martingale Road Number Street Suite 400 Schaumburg Illinois 60173 City State Zip Code Email or website address None	Description and value of transferred  Attorney's Fee \$500.00 p 500.00	any property Date payme or transfer was made	payment
✓	Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 10 N. Martingale Road Number Street Suite 400 Schaumburg Illinois 60173 City State Zip Code	Description and value of transferred  Attorney's Fee \$500.00 p 500.00	any property Date payme or transfer was made	payment
<b>✓</b>	Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 10 N. Martingale Road Number Street Suite 400 Schaumburg Illinois 60173 City State Zip Code Email or website address None Person Who Made the Payment, if Not You	Description and value of transferred  Attorney's Fee \$500.00 p 500.00	any property Date payme or transfer was made	payment
<b>✓</b>	Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 10 N. Martingale Road Number Street Suite 400 Schaumburg Illinois 60173 City State Zip Code Email or website address None	Description and value of transferred  Attorney's Fee \$500.00 p 500.00	any property Date payme or transfer was made	payment
<b>✓</b>	Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 10 N. Martingale Road Number Street Suite 400 Schaumburg Illinois 60173 City State Zip Code Email or website address None Person Who Made the Payment, if Not You  Person Who Was Paid	Description and value of transferred  Attorney's Fee \$500.00 p 500.00	any property Date payme or transfer was made	payment
<b>✓</b>	Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 10 N. Martingale Road Number Street Suite 400 Schaumburg Illinois 60173 City State Zip Code Email or website address None Person Who Made the Payment, if Not You	Description and value of transferred  Attorney's Fee \$500.00 p 500.00	any property Date payme or transfer was made	payment
<b>✓</b>	Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 10 N. Martingale Road Number Street Suite 400 Schaumburg Illinois 60173 City State Zip Code Email or website address None Person Who Made the Payment, if Not You  Person Who Was Paid	Description and value of transferred  Attorney's Fee \$500.00 p 500.00	any property Date payme or transfer was made	payment
<b>✓</b>	Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 10 N. Martingale Road Number Street Suite 400 Schaumburg Illinois 60173 City State Zip Code Email or website address None Person Who Made the Payment, if Not You  Person Who Was Paid	Description and value of transferred  Attorney's Fee \$500.00 p 500.00	any property Date payme or transfer was made	payment
<b>✓</b>	Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 10 N. Martingale Road Number Street Suite 400 Schaumburg Illinois 60173 City State Zip Code Email or website address None Person Who Made the Payment, if Not You  Person Who Was Paid	Description and value of transferred  Attorney's Fee \$500.00 p 500.00	any property Date payme or transfer was made	payment
<b>✓</b>	Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 10 N. Martingale Road Number Street Suite 400 Schaumburg Illinois 60173 City State Zip Code Email or website address None Person Who Made the Payment, if Not You Person Who Was Paid Number Street  City State Zip Code	Description and value of transferred  Attorney's Fee \$500.00 p 500.00	any property Date payme or transfer was made	payment
<b>✓</b>	Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 10 N. Martingale Road Number Street Suite 400 Schaumburg Illinois 60173 City State Zip Code Email or website address None Person Who Made the Payment, if Not You Person Who Was Paid Number Street	Description and value of transferred  Attorney's Fee \$500.00 p 500.00	any property Date payme or transfer was made	payment
<b>✓</b>	Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 10 N. Martingale Road Number Street Suite 400 Schaumburg Illinois 60173 City State Zip Code Email or website address None Person Who Made the Payment, if Not You Person Who Was Paid Number Street  City State Zip Code	Description and value of transferred  Attorney's Fee \$500.00 p 500.00	any property Date payme or transfer was made	payment

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Kieala		Sanders	Case number (if kno	<i></i>	
First Name	Middle Name	Last Name	<del>_</del>		
p you deal with your credito	ors or to make paym	ents to your creditors?	your behalf pay or trans	sfer any property to a	anyone who promised to
No Yes. Fill in the details.					
'		Description and value of transferred	any property	Date payment or transfer was made	Amount of payment
Person Who Was Paid		•			
Number Street					
City State	Zin Code				
	·				
e ordinary course of your bus lude both outright transfers an	siness or financial a d transfers made as s	ffairs? security (such as the granting o			
No Yes. Fill in the details.					
		Description and value of property transferred	payments	s received or debts p	Date transfer was made
Person Who Received Trans	fer	-			
Number Street					
City State Person's relationship to you	Zip Code				
Person Who Received Trans	fer				·
Number Street					
City State Person's relationship to you	Zip Code				
neficiary?		d you transfer any property t	a self-settled trust or	similar device of wh	ch you are a
No Yes. Fill in the details.	,				
-		Description and value	of the property transferr	ed	Date transfer was made
Name of trust					
	thin 1 year before you filed for you deal with your credition of include any payment or trans.  No Yes. Fill in the details.  Person Who Was Paid  Number Street  City State  thin 2 years before you filed to ordinary course of your bust lude both outright transfers and transfers that you have alread transfers that you have alread No Yes. Fill in the details.  Person Who Received Trans  Number Street  City State Person's relationship to you  Person Who Received Trans  Number Street  City State Person's relationship to you  thin 10 years before you filed neficiary? Less are often called asset-protection.  No Yes. Fill in the details.	thin 1 year before you filed for bankruptcy, did y lp you deal with your creditors or to make paym not include any payment or transfer that you listed  No Yes. Fill in the details.  Person Who Was Paid  Number Street  City State Zip Code thin 2 years before you filed for bankruptcy, did to ordinary course of your business or financial a bid transfers that you have already listed on this stater.  No Yes. Fill in the details.  Person Who Received Transfer  Number Street  City State Zip Code Person's relationship to you  Person Who Received Transfer  Number Street  City State Zip Code Person's relationship to you  thin 10 years before you filed for bankruptcy, dineficiary? The see are often called asset-protection devices.)  No Yes. Fill in the details.	thin 1 year before you filed for bankruptcy, did you or anyone else acting on pyou deal with your creditors or to make payments to your creditors? not include any payment or transfer that you listed on line 16.  No Yes. Fill in the details.    Description and value of transferred	Thin I year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transpound include any payment or transfer that you listed on line 16.  No Yes. Fill in the details.  Description and value of any property transferred  Description and value of any property transferred thin 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to ordinary course of your business or financial affairs?  No Yes. Fill in the details.  Description and value of any property transferred payment in exchair city.  Description and value of any property transferred payment in exchair city.  Description and value of any property transferred payment in exchair city.  Description and value of any property transferred payment in exchair city.  Description and value of any property to a self-settled trust or neticiary.  Description and value of the property transferred payment or a self-settled trust or neticiary.  Description and value of the property transferred payment or transferred payment or tra	In the details.  Description and value of any property to a self-settled trust or similar device of white ficiary?  Person Who Received Transfer  Number Street  Description and value of any property to a self-settled trust or similar device of white ficiary?  Person Who Received Transfer  Number Street  Description and value of any property to a self-settled trust or similar device of white ficiary?  Person Who Received Transfer  Number Street  Description and value of any property to anyone, other than self-settled trust or similar device of white ficiary?  Description and value of any property to anyone, other than self-settled trust or similar device of white ficiary?  Description and value of any property to anyone, other than self-settled trust or mortgage on your property transfers that you have already listed on this statement.  No  Yes. Fill in the details.  Description and value of any property or property transfer that you have already listed on this statement.  Description and value of any property or property or property transfer that you have already listed or debts property transferred  Description and value of any property or

#### Case 17-05839 Doc 1 Filed 02/28/17 Entered 02/28/17 14:10:03 Desc Main Document Page 50 of 69

Debtor 1 Kieala Sanders Case number (if known) Middle Name First Name Last Name List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Part 8: 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Last 4 digits of account Type of account or Date Last balance account was before number instrument closed, sold, closing or moved, or transfer transferred XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it? No Name of Financial Institution Name Yes Number Street Number Street City State Zip Code City Zip Code State 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Do you still Who else had access to it? Describe the contents have it? No Name of Storage Facility Name Number Street Street Number City State Zip Code City State Zip Code

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Sanders Debtor 1 Kieala Case number (if known) Middle Name Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. Yes. Fill in the details. Where is the property? Describe the contents Value Owner's Name **NumberStreet** Number Street City State Zip Code City State Zip Code Part 10: **Give Details About Environmental Information** For the purpose of Part 10, the following definitions apply: ■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street Number Street City State Zip Code City State Zip Code 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street NumberStreet City State Zip Code City State Zip Code

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Debt		Kieala			Sanders	Case nu	umber (ifknown)	
		First Name		Middle Name	Last Name			
26.	Hav	e you been a part	y in any judici	ial or administra	ative proceeding under	any environmental	law? Include settlements and order	rs.
	<b>✓</b>	No						
	П	Yes. Fill in the det	ails.					
					Court or agency	ı	Nature of the case	Status of the case
		Case title						Pending
					Court Name			On appeal
		Case number			NumberStreet			Concluded
				,	City State	Zip Code		_
Part	11:	Give Details Ab	oout Your B	usiness or Co	nnections to Any Bu	siness		
27.	Wit	hin 4 years before	you filed for l	oankruptcy, did	you own a business or	have any of the follo	owing connections to any business?	?
		A sole propri	etor or self-er	mploved in a tra	de, profession, or other	activitv. either full-t	ime or part-time	
					LC) or limited liability pa			
				ility Company (L	LO) or intrited liability pa			
			a partnership					
		An officer, di	rector, or mar	naging executiv	e of a corporation			
		An owner of	at least 5% of	the voting or e	quity securities of a corp	ooration		
		No None of the co	L	0.1.0.140				
	Ш	No. None of the a						
	✓	Yes. Check all tha	at apply abov	e and fill in the	details below for each b	ousiness.		
					Describe the natu	ire of the business	Employer Identification nu include Social Security nu	
		Inspire Image			photography, free	elancing, ad, business	EIN:xx-xxx	
		Business Name			cards	narrowing, aa, baoirrooc	EIIV.AA-AAA	
		5138 Washington	St		_			
		Number Street					Dates business existed	
		Hillside	Illinois	60162	Name of accounts	ant or bookkeeper	Dates busilless existed	
		City	State	Zip Code			5 00/0010 T	
							From <u>03/2016</u> To	
					Describe the natu	ure of the business	Employer Identification nu include Social Security nu	
		Duningan Nama			_		EIN:	
		Business Name			_			
		Number Street			Name of account	ant or bookkeeper	Dates business existed	
		City	State	Zip Code	_		From To	
					Describe the natu	ire of the business	Employer Identification nu include Social Security nu	
							EIN:	
		Business Name						
		Number Street			Name of account	ant or bookkeeper	Dates business existed	
		City	State	Zip Code	- ivanie di accounti	ant or bookkeeper	FromTo	
				1			110111	

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Deb	tor 1	Kieala			Sanders	Case number (if known)
		First Name		Middle Name	Last Name	
28.		nin 2 years before ditors, or other par No Yes. Fill in the det	rties.	oankruptcy, did yo	u give a financial stateme	nt to anyone about your business? Include all financial institutions,
					Date issued	
		Name			MM/DD/YYYY	
					_	
		Number Street				
		Cit.	Otata	7:- 01-	_	
		City	State	Zip Code		
Pari	12:	Sign Below				
1	true a	and correct. I unde kruptcy case can	erstand that r result in fine	naking a false sta s up to \$250,000,	tement, concealing proper	ents, and I declare under penalty of perjury that the answers are ty, or obtaining money or property by fraud in connection with 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
			Kieala Sanders ure of Debtor 1			Signature of Debtor 2
		Oigrida	aro or Bobtor			Date
		Date 2	2/28/2017			Date
	Did vo	ou attach addition	al pages to Y	our Statement of	Financial Affairs for Individ	luals Filing for Bankruptcy (Official Form 107)?
	<u> </u>	lo ′es	an pagos to .			
ı	Did yo	ou pay or agree to	pay someon	who is not an at	orney to help you fill out b	ankruptcy forms?
					• • •	
	_	lo 				Allech Hea Book and a Bullion Burnanda Malin
	∐ <sup>Y</sup>	es. Name of persor	1			Attach the <i>Bankruptcy Petition Preparer's Notice,</i> Declaration, and Signature (Official Form 119).

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Fill in this information to identify your case:				
Debtor 1	Kieala	Sanders		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States E	Sankruptcy Court for the:	Northern	District of Illinois (State)	
Case number (If known)			(Otato)	

Check if this is an amended filing

#### Official Form 108

#### Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

#### Part 1: List Your Creditors Who Have Secured Claims For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below. Did you claim the property Identify the creditor and the property that is collateral What do you intend to do with the property that secures a debt? as exempt on Schedule C? Surrender the property. Creditor's name: WFDS Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: 072 Automobile Retain the property and [explain]: Creditor's Surrender the property. No. name: Yes. Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agréement. securing debt: Retain the property and [explain]: No. Surrender the property. Creditor's name: Yes. Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: Retain the property and [explain]: No. Creditor's Surrender the property. name: Yes Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agréement. securing debt: Retain the property and [explain]:

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Debtor			Sanders	Case number (if	
1	First Name	Middle Name	Last Name	known)	
Part 2:	List Your Unexpired Per	rsonal Property Lease	es		
informa		estate leases. Unexpired	leases are leases tha	ry Contracts and Unexpired Leases (Official For t are still in effect; the lease period has not yet 1 U.S.C. § 365(p)(2).	
Des	scribe your unexpired persor	nal property leases		Will the lease be assi	ımed?
Les	sor's name:			☐ No ☐ Yes	
	cription of leased perty:			_	
Les	sor's name:			☐ No ☐ Yes	
	cription of leased perty:			<del>_</del>	
Les	sor's name:			□ No □ Yes	
	cription of leased perty:				
Les	sor's name:			☐ No ☐ Yes	
	cription of leased perty:				
Les	sor's name:			☐ No ☐ Yes	
	scription of leased perty:				
Les	sor's name:			☐ No ☐ Yes	
	scription of leased perty:				
Les	sor's name:			☐ No ☐ Yes	
	cription of leased perty:			<del></del>	
Part 3:	Sign Below				
	er penalty of perjury, I declar erty that is subject to an un		my intention about an	y property of my estate that secures a debt and	any personal
<b>~</b>	lal Kinala Conde		*		
_	/s/ Kieala Sanders gnature of Debtor 1		_	ignature of Debtor 2	
			3	ig. 1440 01 000101 2	
Da	ate 2/28/2017 MM/DD/YYYY		D	ate	
	1 1 1 1 / U U / I I I			ויווו/טט/וווו	

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B2030 (Form 2030) (12/15)

In

#### **UNITED STATES BANKRUPTCY COURT**

Northern District of Illinois

		Northern Distr	ict of illiliois	
e	Kieala Sanders		Case No.	461
	Debtor			(If known)
			Chapter	Chapter 7
	DISCLOSURE OF	COMPENSATIO	N OF ATTORNEY F	OR DEBTOR
comp	pensation paid to me within one	year before the filing of the	ify that I am the attorney for the abo petition in bankruptcy, or agreed to plation of or in connection with the	be paid to me, for services
For le	egal services, I have agreed to a	ccept		\$1,250.00
Prior	to the filing of this statement I	have received		\$118.0
Balan	nce Due			\$1,132.0
2. The s	source of the compensation paid	d to me was:		
	<b>✓</b> Debtor	Other (specify	)	
3. The s	ource of the compensation paid	d to me is:		
	<b>✓</b> Debtor	Other (specify	)	
	have not agreed to share the ab nembers and associates of my l		on with any other person unless the	y are
Шm		w firm. A copy of the agreem	vith a other person or persons who a nent, together with a list of the name	
			al service for all aspects of the bank g advice to the debtor in determining	
b	o. Preparation and filing of any	petition, schedules, stateme	ents of affairs and plan which may b	pe required;
C	c. Representation of the debtor	at the meeting of creditors	and confirmation hearing, and any a	adjourned hearings thereof;
6. By ag	greement with the debtor(s), the	above-disclosed fee does n	not include the following services:	
		CERTIFIC	CATION	
	that the foregoing is a comple this bankruptcy proceedings.	te statement of any agreeme	ent or arrangement for payment to n	ne for representation of the
	2/28/2017		/s/ Yisroel Y Moskovits	
	Date		Signature of Attorney	
			Semrad Law Firm	
			Name of law firm	

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

#### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

#### **Chapter 7: Liquidation**

	\$245	filing fee
	\$75	administrative fee
+	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### Chapter 11: Reorganization

	\$1,167	filing fee
+	\$550	administrative fee
	\$1,717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

## Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes.
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.

### Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

# Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://www.justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://www.justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to:
<a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit</a>
20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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#### **UNITED STATES BANKRUPTCY COURT**

Northern District of Illinois

In re:	Sanders, Kieala	Casa No	Case No.		
	Debtor(s)				
		Chapter.	Chapter7		
	VERIFIC	ATION OF CREDITOR MAT	RIX		
Ti knowledge	he above named Debtors hereby verify e.	that the attached list of creditors is tru	ue and correct to the best of their		
Date:	2/28/2017	/s/ Sanders, Kieal	la		
		Sanders, Kieala <i>Sianature of Deb</i>	tor		

DEPT OF ED/NAVIENT PO BOX 9635 WILKES BARRE, PA, 18773

WFDS PO BOX 19657 IRVINE, CA, 92623

JEFFERSON CAPITAL SYST 16 MCLELAND RD SAINT CLOUD, MN, 56303

Comenity Bank/Express PO BOX 330066 NORTHGLENN, CO, 80233

CAPITAL ONE P O Box 30253 Salt Lake City, UT, 84130

COMENITY BANK/VCTRSSEC 220 W SCHROCK RD. Westerville, OH, 43081

NAVIENT SOLUTIONS INC c/o Melissa Yateshin PO Box 9430 Wilkes Barre, PA, 18773

Alpha Recovery Corp 5660 Greenwood Plaza Blvd # 101 Englewood, CO, 80111

Comenity Bank Po Box 182273 Columbus, OH, 43218

Recovery Management Services PO Box 8130 Palatine, IL, 60073

The Illinois Institute of Art - Schaumburg 1000 Plaza Dr #100 Schaumburg, IL, 60173 Case 17-05839 Doc 1 Filed 02/28/17 Entered 02/28/17 14:10:03 Desc Main Document Page 63 of 69

Debtor 1 Kieala		Sanders	Case number (if know	/n)
First Name	Middle Name estions for Reporting Purpose	Last Name		
Part 6: Answer These Qu  16. What kind of debts do you have?	16a. Are your debts primari "incurred by an individu No. Go to line 16b. Yes. Go to line 17.	ly consumer d al primarily for ly business del investment or	a personal, family, or house  ots? Business debts are det  through the operation of th	ots that you incurred to obtain e business or investment.
17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	expenses are paid that  No.	er 7. Do vou esti		
18. How many creditors do you estimate that you owe?	☑ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999	5,0	00-5,000 01-10,000 001-25,000	☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than 100,000
19. How much do you estimate your assets to be worth?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$10 \$50	000,001-\$10 million 0,000,001-\$50 million 0,000,001-\$100 million 00,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
20. How much do you estimate your liabilities to be?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	☐ \$10 ☐ \$50	000,001-\$10 million 0,000,001-\$50 million 0,000,001-\$100 million 00,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
Part 7: Sign Below	Lhave exemined this patition	and I declare u	nder penalty of perium that	the information provided is true and
For you	correct.  If I have chosen to file under Confittle 11, United States Code under Chapter 7.  If no attorney represents me an out this document, I have obtain request relief in accordance villunderstand making a false state connection with a bankruptcy both. 18 U.S.C. §§ 152, 1341, 154 Meala Sanders	chapter 7, I am and I did not pay ained and read with the chapter atement, concepts case can result 1519, and 357	aware that I may proceed, if the relief available under early or agree to pay someone with a notice required by 11 U. of title 11, United States Coaling property, or obtaining in fines up to \$250,000, or 71.	eligible, under Chapter 7, 11,12, or 13 ch chapter, and I choose to proceed who is not an attorney to help me fill .S.C. § 342(b). Code, specified in this petition. I money or property by fraud in imprisonment for up to 20 years, or
	Executed on2/28/2017 MM / D	D/YYYY	Executed o	MM / DD / YYYY

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Fill in this infor	mation to identify your ca	ise:			
Debtor 1	Kieala		Sanders		
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name		
United States E	Sankruptcy Court for the:	Northern	District of Illinois (State)	<u> </u>	
Case number (if known)					
	100Do				Check if this is ar amended filing
	Form 106De	<del></del>			
Declarat	ion About an I	ndividual Debt	or's Schedule	es	12/1
U.S.C. §§ 152,	1341, 1519, and 3571.			to \$250,000, or imprisonment for up to	
Did you p	ay or agree to pay some	one who is NOT an attorn	ey to help you fill out ba	nkruptcy forms?	
✓ No Yes.	Name of person		Attach Bankruptcy Signature (Official	y Petition Preparer's Notice, Declaration, al Form 119).	nd
Under pe that they	are true and correct.	that I have read the sum	nmary and schedules filed	d with this declaration and	
	of Debtor 1	- Jove Cus	Signatu	ure of Debtor 2	

MM/DD/YYYY

Signature of Debtor 1

Date 2/28/2017

MM/DD/YYYY

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Debtor 1	Kieala			Sanders	Case number (if known)
	First Name		Middle Name	Last Name	and the second
28. Wi	thin 2 years before yeditors, or other par	you filed for b	ankruptcy, did yo	u give a financial state	ement to anyone about your business? Include all financial institutions,
	No / Yes. Fill in the deta	ails below.			
<b>1</b>				Date issued	
	Name			MM/DD/YYYY	_ <del>_</del>
	Number Street			•	
	City	State	Zip Code	•	
Part 12:	Sign Below				
	and correct. I unde				hments, and I declare under penalty of perjury that the answers are operty, or obtaining money or property by fraud in connection with to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
		re of Debtor 1	granac	poore de	Signature of Debtor 2
	Signate				Date
	Date 2	/28/2017			
Did y	you attach addition	al pages to Y	our Statement of I	Financial Affairs for Inc	dividuals Filing for Bankruptcy (Official Form 107)?
V	No				
	Yes				
Did y	you pay or agree to	pay someone	who is not an att	orney to help you fill o	ut bankruptcy forms?
	No				Attach the Bankruptcy Petition Preparer's Notice,
	Yes. Name of person	l			Declaration, and Signature (Official Form 119).

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btor k	Kieala	_	Sanders	Case numbe	er (if
_	irst Name	Middle Name	Last Name	known)	
t 2: L	ist Your Unexpired	Personal Property Leas	es		
r any u	nexpired personal pro	lease that you listed in	Schedule G: Execut	at are still in ellect, the	pired Leases (Official Form 106G), fill in the lease period has not yet ended. You may
Desc	ribe your unexpired po	ersonal property leases			Will the lease be assumed?
Lesso	or's name:	erreta (h. 1907)		er - A. segarat server Anna and a segarat segarat segarat segarat segarat segarat segarat segarat segarat segar	No Yes
Descr	iption of leased erty:				
Lesso	or's name:				□ No □ Yes
Descr prope	iption of leased erty:				
Lesso	or's name:		***		No Yes
Descr prope	iption of leased erty:				
Lesso	or's name:	and the second s			□ No □ Yes
Descr prope	iption of leased erty:				
Lesso	or's name:				□ No □ Yes
Descr prope	iption of leased rty:				
Lesso	or's name:				□ No □ Yes
Descri	iption of leased rty:				
Lesso	or's name:				☐ No ☐ Yes
Descri	iption of leased erty:				
	ign Below				
Under proper	penalty of perjury, I de ty that is subject to a	eclare that I have indicated in unexpired lease.	my intention about a	ny property of my estate	that secures a debt and any personal
	/ Kieala Sanders	Kuala Jander	×	Signature of Debtor 2	
_	2/28/2017 MM/DD/YYYY			Date MM/DD/YYYY	

page 2

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#### **UNITED STATES BANKRUPTCY COURT**

**Northern District of Illinois** 

In re:	Sanders, Kieala	Case No	Case No		
_	Debtor(s)		·		
		Chapter	Chapter7		
	VERIFIC	CATION OF CREDITOR MAT	RIX		
knowle	The above named Debtors hereby verify edge.	$\gamma$ that the attached list of creditors is ${\sf tru}$	ue and correct to the best of their		
Date:	2/28/2017	Sanders, Kieaia	Leala Janden		
		Signature of Debi	tor		

### CONTRACT FOR LEGAL SERVICES FOR REPRESENTATION IN A CHAPTER 7 BANKRUPTCY CASE

I do hereby retain the law firm of The Semrad Law Firm, LLC, to represent my legal interests solely in a Bankruptcy case filed under Chapter 7 of the United States Bankruptcy Code. I further understand that this representation DOES NOT INCLUDE defending my interests in any adversary proceeding filed against me nor does this representation cover state court proceedings or criminal litigation.

I agree to pay The Semrad Law Firm, LLC **\$1250.00** in attorney fees plus costs in the amount of **\$382.00** to represent my interests in the preparation and filing of my Chapter 7 Petition and Schedules; preparation and attendance of the Section 341 Meeting of Creditors; review of any redemption agreements; review of any reaffirmation agreements; and case administration and monitoring. I further understand and agree that additional professional legal services will result in fees that are due The Semrad Law Firm, LLC. Some of the additional services and fees are as follows:

Representing Client in Adversary Proceeding. \$300.00/hr.
Adding additional bills \$50.00
Motion to Reopen and Avoid Lien \$1000.00

Motion to Reopen \$350.00 + court costs

I understand that these fees must be paid before such work will be completed. I acknowledge and agree that as the above additional fees constitute post-petition services, they are not dischargeable in my Chapter 7 case.

I also understand that, unless otherwise agreed, my Chapter 7 bankruptcy case will not be filed until I pay the attorney fees in full. As The Semrad Law Firm, LLC will begin to work on my file immediately after entering into this contract; I understand that any and all funds paid are not refundable.

I understand that once my bankruptcy is filed, I will not be legally obligated to pay the balance of any unpaid fees to The Semrad Law Firm, LLC. Any fees owing to The Semrad Law Firm, LLC and not paid as of the filing of the bankruptcy may be discharged in the bankruptcy and may not be collected by The Semrad Law Firm, LLC or it assignees. After my bankruptcy is filed, I may sign a second retainer agreement promising to pay unpaid fees for the remainder of my representation in consideration of services to be performed by The Semrad Law Firm, LLC after the filing of my bankruptcy. I understand that I will be under no obligation to do so and can refuse to sign such an agreement. However, The Semrad Law Firm, LLC reserves the right to withdraw representation in the event that I do not sign a second retainer after filing my case promising to pay said fees or in the event that I do not pay said fees.

I understand that any funds that I am tendering to The Semrad Law Firm, LLC, as part of this **advance payment retainer** shall immediately become the property of The Semrad Law Firm, LLC, in exchange for a commitment by The Semrad Law Firm, LLC, to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC, and will be used for general expenses of the firm. I further understand that it is ordinarily my option to deposit funds with an attorney that shall remain my property as security for future services. However, The Semrad Law Firm, LLC, does not represent clients under such a security retainer because the preparation of a bankruptcy case requires many disparate tasks and functions for the attorney and support staff; some of which require legal expertise while others may be only ministerial in nature. I further understand that the benefit that I am receiving under this fee arrangement is the commitment of The Semrad Law Firm, LLC, to perform any and all work reasonably necessary to file my case absent any extraordinary circumstances.

As The Semrad Law Firm, LLC, has duties to me as its client, I likewise have responsibilities. I agree to fully cooperate with The Semrad Law Firm, LLC. This includes, but is not limited to, providing The Semrad Law Firm, LLC with all information necessary and related to my bankruptcy case. In addition, I must attend all scheduled Court hearings and meetings.

I understand that I am to notify my creditors of my bankruptcy case once my Chapter 7 case is filed. I understand that The Semrad Law Firm, LLC is not liable or responsible for any illegal collection actions taken by my creditors once my case is filed.\*

I also understand that, if I am refiling a case with The Semrad Law Firm, LLC, and an audit of the previous case(s) indicate that remaining attorney fees are owed; any initial funds I pay to refile will first be applied to the balance owed on the previous case(s). If client breaches this agreement, client will be responsible for all costs associated with enforcing the terms of this contract including but not limited to court costs and attorney fees.

I also understand that, if I am filing a joint case, the use of the personal pronouns "I", "me" or "my" are binding upon each signatory individually. I also understand that the laws of the State of Illinois are applicable to enforcement of this contract. Moreover, any change in this Contract is null and void unless it is in writing and signed by The Semrad Law Firm, LLC, or an agent thereof.

Date: 02/28/2017

\*DISCLAIMER

The creditors listed in your bankruptcy petition will receive notice of your bankruptcy filing from the Clerk of the United States Bankruptcy Court. Please be advised that it will be several days before these creditors receive the notice. Therefore, if you are concerned about a particular creditor taking immediate action against you, contact this creditor directly and provide the creditor with a copy of your Notice of Bankruptcy Filing. This is especially important if you are at risk of having you vehicle repossessed, real estate foreclosed, or wages garni